

**Non-public Information – Minors**

**Case Number** \_\_\_\_\_

Use this document to provide non-public information to the court. Write the information here, and omit it from the public document. Complete as many forms as needed. Serve this form on the other party.

I swear or affirm that the following information is true.

\* Keep the residential address private and do not provide it to the other party because there is reason to believe that releasing the information may result in physical or emotional harm to me or to my child. (If you check this box, omit the child's residential address from this document and from all other papers filed with the court. Include it on the Safeguarded Address form.)

(1) Name of Minor	Residential Address*	Date of Birth	Sex	Social Security Number
The following information is required only if custody or parent time is part of the case.				
Places the minor has lived in the last 5 years	Dates	Name & current address of the person the minor lived with		

(2) Name of Minor	Residential Address*	Date of Birth	Sex	Social Security Number
The following information is required only if custody or parent time is part of the case.				
Places the minor has lived in the last 5 years	Dates	Name & current address of the person the minor lived with		

(3) Name of Minor	Residential Address*	Date of Birth	Sex	Social Security Number
The following information is required only if custody or parent time is part of the case.				
Places the minor has lived in the last 5 years	Dates	Name & current address of the person the minor lived with		

(4) Name of Minor	Residential Address*	Date of Birth	Sex	Social Security Number
The following information is required <u>only if custody or parent time is part of the case.</u>				
Places the minor has lived in the last 5 years	Dates	Name & current address of the person the minor lived with		

(5) Name of Minor	Residential Address*	Date of Birth	Sex	Social Security Number
The following information is required <u>only if custody or parent time is part of the case.</u>				
Places the minor has lived in the last 5 years	Dates	Name & current address of the person the minor lived with		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name \_\_\_\_\_

I certify that \_\_\_\_\_, who is known to me or who presented satisfactory identification, has, while in my presence and while under oath or affirmation, voluntarily signed this document and declared that it is true.

Date: \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name (Court Clerk or Notary Public) \_\_\_\_\_

Notary Seal

Judicial Services Representative: This is a private record.

**Certificate of Service**

I certify that I served a copy of this Non-public Information Form on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_