

Non-public Information – Parent Identification and Location		Case Number _____	
Notice: This information is required by the U.S. Secretary of Health and Human Services. If the information changes, you must complete and file another form. (Utah Code Section 62A-11-304.4.)			
Name		Telephone Numbers (Include area code.)	
		Day	Evening
Residential Address			
<input type="checkbox"/> Keep my 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 your residential address from this document and from all other papers filed with the court. Include it on the Safeguarded Address form.)			
Mailing Address (if different from residential address)			
Date of Birth	Social Security Number	Driver's License	
		State	Number
Employer Name, Address and Telephone Number			
Employer Name, Address and Telephone Number			
I am: (check all that apply) <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Custodial Parent <input type="checkbox"/> Non-custodial Parent <input type="checkbox"/> Filing this information about myself <input type="checkbox"/> Filing this information about the other party			

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date _____ Sign here ► _____

Typed or printed name _____

Judicial Services Representative: This is a private record.