

FILING INFORMATION SHEET

INSTRUCTIONS:

- ✓ Complete this form for all parties known at the time of filing.
- ✓ If additional space is needed, complete additional Filing Information Sheets.

NOTE: Social Security Number (SSN) is **required** if the party is a person; exception can only be granted if the information is not reasonably available. **This is a confidential record due to the SSN and possible confidential addresses. However, this information is used to open a case in the Missouri State Courts Automated Case Management System. Cases deemed public under Missouri Revised Statutes can be accessed through Case.net. The day and month of birth, SSN, and confidential addresses are NOT provided to the public through Case.net access.**

Filing Date: _____ County: _____

Style of Case: _____
(i.e., In the Estate of; In the Matter of; Petitioner v. Respondent.)

Case Type Code: _____ Case Type Description: _____
Provide the most appropriate two-letter Case Type code & description.
(Found on the Case Types List at www.courts.mo.gov on the Court Forms/Filing Information page.)

Party Type Code: _____ Party Type Description: _____ Provide the appropriate Party Type Code and description. (Found on the Party Types List at www.courts.mo.gov on the Court Forms/Filing Information page.)
Last Name: _____ First Name: _____
Middle Name: _____ Address: _____
City: _____ State: _____ Zip: _____
DOB/DOD: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female SSN/Bar ID: _____ Bar ID required if attorney

Party Type Code: _____ Party Type Description: _____ Provide the appropriate Party Type Code and description. (Found on the Party Types List at www.courts.mo.gov on the Court Forms/Filing Information page.)
Last Name: _____ First Name: _____
Middle Name: _____ Address: _____
City: _____ State: _____ Zip: _____
DOB/DOD: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female SSN/Bar ID: _____ Bar ID required if attorney

Party Type Code: _____ Party Type Description: _____ Provide the appropriate Party Type Code and description. (Found on the Party Types List at www.courts.mo.gov on the Court Forms/Filing Information page.)
Last Name: _____ First Name: _____
Middle Name: _____ Address: _____
City: _____ State: _____ Zip: _____
DOB/DOD: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female SSN/Bar ID: _____ Bar ID required if attorney

Submitted by: _____ Bar ID: _____
required (if attorney)

Phone: _____

Party Representing: _____