Case Number (For Court Use Only) _____

Required at Time of Filing Petition

Information only for court and law enforcement*

Confidential Case Filing Information Sheet
Domestic Relations Cases – Child Protection

NOTICE TO LAW ENFORCEMENT: This is a confidential form and shall be used only to enter the case into the Missouri Uniform Law Enforcement System (MULES).

DO NOT SERVE THIS FORM TO THE RESPONDENT.

Instructions to Filer:

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

NOTE: If known, the **full** Social Security Number (SSN) is ***required*** pursuant to section 509.520, RSMo. This is a confidential document due to the SSN and possible confidential addresses. This information is used to open a case in the courts case management system. While cases deemed public under Missouri 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.

Filing Date: _____ County/City of St. Louis: _____

Case Type: ☐ Child Protection Order ☐ Registration of Foreign Protection Order

Petitioner/Protected Person Information:

Party Type Code and Description: (Select one)

☐ PETP Party Type Description: Petitioner Acting Pro Se (with no attorney)

☐ PET Party Type Description: Petitioner (with attorney)

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address: _____

City: _____ State: _____ Zip: _____

☐ **Revealing my current address or where I live may put the protected children in danger.**

⚠ **If revealing your current address or where you live puts the protected children in danger, check the box above to have your address marked as confidential.**

Case Number (For Court Use Only) _____

Contact Telephone Number: _____

Email Address: _____

Temporary and/or Mailing Address (if different from above):

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

Race & Ethnicity Source: Petitioner

Race & Ethnicity is self-identified.

Respondent Information:

Party Type Code and Description: (Select one)

☐ RESP Party Type Description: Respondent Acting Pro Se (with no attorney)

☐ RES Party Type Description: Respondent (with attorney)

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Telephone Number: _____

Email Address: _____

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

Race & Ethnicity Source: (Select one) ☐ Petitioner ☐ Court ☐ Law Enforcement ☐ Jail

☐ Department of Corrections/Probation and Parole ☐ Another State Agency

☐ Driver's License ☐ Unknown

Race & Ethnicity is observed/perceived.

Case Number (For Court Use Only) _____

The following information regarding the protected child(ren) is required. Complete this section for any child subject to the action of this case. If revealing the protected child's current address or place of residence will put the child in danger, check the box under the address for each child to indicate the address is confidential.

Protected Child(ren) Information:

Protected Child 1

Party Type Code: CHLD Party Type Description: Child

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address (if different than Petitioner address): _____

☐ **This is a confidential address.**

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

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Race & Ethnicity Source: (Select one) ☐ Petitioner ☐ Court ☐ Law Enforcement

☐ Another State Agency ☐ Driver's License ☐ Unknown

Race & Ethnicity is observed/perceived.

Protected Child 2

Party Type Code: CH2 Party Type Description: Child 2

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address (if different than Petitioner address): _____

☐ **This is a confidential address.**

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

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Case Number (For Court Use Only) _____

Race & Ethnicity Source: (Select one) ☐ Petitioner ☐ Court ☐ Law Enforcement

☐ Another State Agency ☐ Driver's License ☐ Unknown

Race & Ethnicity is observed/perceived.

Protected Child 3

Party Type Code: CH3 Party Type Description: Child 3

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address (if different than Petitioner address): _____

☐ **This is a confidential address.**

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

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Race & Ethnicity Source: (Select one) ☐ Petitioner ☐ Court ☐ Law Enforcement

☐ Another State Agency ☐ Driver's License ☐ Unknown

Race & Ethnicity is observed/perceived.

Protected Child 4

Party Type Code: CH4 Party Type Description: Child 4

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address (if different than Petitioner address): _____

☐ **This is a confidential address.**

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

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Race & Ethnicity Source: (Select one) ☐ Petitioner ☐ Court ☐ Law Enforcement

Case Number (For Court Use Only) _____

☐ Another State Agency ☐ Driver's License ☐ Unknown

Race & Ethnicity is observed/perceived.

Protected Child 5

Party Type Code: CH5 Party Type Description: Child 5

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Address (if different than Petitioner address): _____

☐ **This is a confidential address.**

Date of Birth: _____ Sex: ☐ Male ☐ Female SSN: _____

Race and Ethnicity: (Select one or more) ☐ American Indian or Alaska Native ☐ Asian

☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White

☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown

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Race & Ethnicity Source: (Select one) ☐ Petitioner ☐ Court ☐ Law Enforcement

☐ Another State Agency ☐ Driver's License ☐ Unknown

Race & Ethnicity is observed/perceived.

☐ Check if more than five children and complete Addendum.

Submitted by: _____

If submitted by an attorney, complete the following:

Bar ID: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

IMPORTANT: It is the parties' responsibility to keep the court informed of any change of address or employment.

Instructions to Clerk

This copy of this form shall be sent to law enforcement to enter the case into MULES. This document must be saved in the case management system with a document security level of 6 making this a sealed document.