

FOR COURT USE ONLY

Confidential Case Filing Information Sheet – Addendum Domestic Relations Cases – Child Protection

Required at Time of Filing Petition

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.

Additional Children Needing Protection

Protected Child 6	
Party Type Code: CH6	Party Type Description: Child 6
Name: (Last)	(First)
(Middle)	(Suffix)
Address (if different than Petitioner	address):
☐ This is a confidential add	Iress.
Date of Birth:	Sex: Male Female SSN:
Black or African American	more)
Race & Ethnicity Source: (Select of Another State Agency Dri	ne)
Race & Ethnicity is observed/perce	vived.
Protected Child 7	
Party Type Code: CH7 F	Party Type Description: Child 7
Name: (Last)	(First)
	(Suffix)
Address (if different than Petitioner	address):
☐ This is a confidential add	Iress.
Date of Birth:	Sex: Male Female SSN:
Black or African American	more)

	Case Number (For Court Use Only)
Race & Ethnicity Source: (Selec	t one) 🗌 Petitioner 🔲 Court 🔲 Law Enforcement
☐ Another State Agency ☐	Driver's License Unknown
Race & Ethnicity is observed/pe	rceived.
Protected Child 8	
Party Type Code: CH8	Party Type Description: Child 8
	(First)
(Middle)	(Suffix)
Address (if different than Petition	ner address):
☐ This is a confidential a	ddress.
Date of Birth:	Sex: Male Female SSN:
Black or African American	or more)
	t one)
Race & Ethnicity is observed/pe	rceived.
Protected Child 9	
Party Type Code: CH9	Party Type Description: Child 9
Name: (Last)	(First)
(Middle)	(Suffix)
Address (if different than Petition	ner address):
☐ This is a confidential a	ddress.
Date of Birth:	Sex: Male Female SSN:
☐ Black or African American	or more)
_ ` _	t one)
Race & Ethnicity is observed/pe	rceived.

	Case Number (For Court Use Only)
Protected Child 10	
Party Type Code: CH10	_ Party Type Description: Child 10
Name: (Last)	(First)
(Middle)	(Suffix)
Address (if different than Petitic	oner address):
☐ This is a confidential a	address.
Date of Birth:	_ Sex: Male Female SSN:
☐ Black or African American	e or more)
☐ Hispanic or Latino	Middle Eastern or North African (MENA)
	ct one)
Race & Ethnicity is observed/pe	erceived.