Case Number (For Court Use Only) _____

FOR COURT USE ONLY
Confidential Case Filing Information Sheet – Criminal

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

ST V.

Defendant Information:

Name: (Last) _____ (First) _____

(Middle) _____ (Suffix) _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Telephone Number: _____

Email Address: _____

Date of Birth: _____ SSN: (Required) _____

Sex: ☐ Male ☐ Female Height: _____ Weight: _____

Hair: (Select one) ☐ Blond ☐ Black ☐ Blue ☐ Brown ☐ Green ☐ Grey ☐ Orange
☐ Pink ☐ Purple ☐ Red ☐ Sandy ☐ Unknown or Completely Bald ☐ White

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Eyes: (Select one) ☐ Black ☐ Blue ☐ Brown ☐ Dichromatic ☐ Green ☐ Grey
☐ Hazel ☐ Multicolored ☐ Maroon ☐ Pink ☐ Unknown

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) ☐ Prosecutor ☐ Court ☐ Law Enforcement ☐ Jail
☐ Department of Corrections/Probation and Parole ☐ Another State Agency
☐ Driver's License ☐ Unknown

Race & Ethnicity is ☐ self-identified ☐ observed/perceived. (Select one)

CHARGE INFORMATION:		
Count I	Charge:	Charge Code:
Count II	Charge:	Charge Code:
Count III	Charge:	Charge Code:
Count IV	Charge:	Charge Code:
Count V	Charge:	Charge Code:
Count VI	Charge:	Charge Code:
Count VII	Charge:	Charge Code:
Count VIII	Charge:	Charge Code:
Count IX	Charge:	Charge Code:
Count X	Charge:	Charge Code:

USE ADDITIONAL PAGE IF MORE THAN TEN COUNTS.

OCN: _____ Arrest Date: _____

Arresting Officer: _____ Badge No.: _____

ORI: _____ Agency: _____

Submitted By: _____ Bar ID: _____

Prosecuting Attorney: _____ Phone: _____

Email Address: _____