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| --- | --- |
| **Attachment to  Confidential Information  (Additional Parties or Children)** (AT)  **Clerk: Do not file in a public access file** | County:  Case No.: |

***Use this form*** *if there are more parties or children in your case than you can list on the Confidential Information form.*

1. **Other Party’s Information (if any)** – This person is a*(check one):*  Petitioner  Respondent

|  |  |  |  |
| --- | --- | --- | --- |
| Full name *(first, middle, last):* | | Date of birth *(mm/dd/yyyy):* | Sex:  M  F |
| Driver’s license/Identicard *(#, state):* | Race: | Relationship to children in this case: | |
| Mailing address *(This address will* ***not*** *be kept private.) (street address or PO box, city, state zip):* | | | |

If your case is **only** about a protection order, the information below is **not** required. Skip to 2.

|  |  |  |
| --- | --- | --- |
| Home address *(check one):*  same as mailing address  listed below *(street, city, state, zip):* | | |
| Phone: | Email: | Social Sec. #: |
| Employer’s name: | | Employer’s phone: |
| Employer’s address: | | |

2. **Other Party’s Information (if any)** – This person is a*(check one):*  Petitioner  Respondent

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full name *(first, middle, last):* | | | Date of birth *(mm/dd/yyyy):* | Sex:  M  F |
| Driver’s license/Identicard *(#, state):* | Race: | Relationship to children in this case: | | |
| Mailing address *(This address will* ***not*** *be kept private.) (street address or PO box, city, state zip):* | | | | |

If your case is **only** about a protection order, the information below is **not** required. Skip to 3.

|  |  |  |
| --- | --- | --- |
| Home address *(check one):*  same as mailing address  listed below *(street, city, state, zip):* | | |
| Phone: | Email: | Social Sec. #: |
| Employer’s name: | | Employer’s phone: |
| Employer’s address: | | |

3. **Other Children’s Information (if any)** *(You do not have to fill out the children’s Social Security numbers if your case is only about a protection order.)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Child’s full name  *(first, middle, last)* | | Date of birth *(mm/dd/yyyy)* | Race | Sex | Soc. Sec. # | Current location: lives with |
| 7. |  |  |  | M  F |  | Petitioner  Respondent  other: |
| 8. |  |  |  | M  F |  | Petitioner  Respondent  other: |