

In The Court of Common Pleas, Lucas County, Ohio
Juvenile Division

Case Number: _____

PERSONAL IDENTIFIER INFORMATION FORM

1. _____
Child's Full Name

DOB Last 4 Digits of SS #

3. _____
Child's Full Name

DOB Last 4 Digits of SS #

5. _____
Child's Full Name

DOB Last 4 Digits of SS #

2. _____
Child's Full Name

DOB Last 4 Digits of SS #

4. _____
Child's Full Name

DOB Last 4 Digits of SS #

6. _____
Child's Full Name

DOB Last 4 Digits of SS #

Notice: Effective July 1, 2009, documents filed in, or submitted to this Court **SHOULD NOT** contain "PERSONAL IDENTIFIERS".

THE FOLLOWING INFORMATION WILL BE MAINTAINED SEPARATELY FROM THE CASE FILE DOCUMENTS.

1. CHILD PROTECTION CASES

A child's name in an Abuse, Neglect or Dependency case is confidential. The child's actual identity will be referenced ON THIS FORM ONLY. Please indicate below how each child listed above will be identified on pleadings. Use only initials, a generic abbreviation or "child" (i.e., John Smith Jr. could be JS Jr., or Child 1, Child 2, etc.)

Child 1 Named Above Identifier _____ Child 2 Named Above Identifier _____
Child 3 Named Above Identifier _____ Child 4 Named Above Identifier _____
Child 5 Named Above Identifier _____ Child 6 Named Above Identifier _____

2. ALL OTHER CASE TYPES

Full Social Security Numbers (except for the last 4 digits), Phone Numbers and Email Addresses are considered confidential. This information should NOT be shown on pleadings and should be recorded below ON THIS FORM ONLY.

1. Party Name: _____ Cell Phone #: _____
Last 4 Digits of SS #: _____ Cell Phone Carrier*: _____
Home Phone #: _____ Email Address: _____

2. Party Name: _____ Cell Phone #: _____
Last 4 Digits of SS #: _____ Cell Phone Carrier*: _____
Home Phone #: _____ Email Address: _____

3. Party Name: _____ Cell Phone #: _____
Last 4 Digits of SS #: _____ Cell Phone Carrier*: _____
Home Phone #: _____ Email Address: _____

4. Party Name: _____ Cell Phone #: _____
Last 4 Digits of SS #: _____ Cell Phone Carrier*: _____
Home Phone #: _____ Email Address: _____

3. If DOMESTIC VIOLENCE is indicated, the Victim's Address, Phone Numbers and Email Address should NOT be included on pleadings, record this information below ON THIS FORM ONLY.

Victim's Name: _____ Cell Phone #: _____
Address: _____ Cell Phone Carrier*: _____
_____ Email Address: _____
Home Phone #: _____

* Please provide the name of the company you receive cell phone service through (i.e., Verizon, T-Mobile, AT&T, etc.)