

## **DETERMINING PARENTING RIGHTS AND RESPONSIBILITIES WITH AN AGREEMENT ON ALL ISSUES**

### **INSTRUCTIONS FOR FORM 4: CONFIDENTIAL INFORMATION FORM**

(Form 4: Confidential Information Form is part of the *Determining Parenting Rights and Responsibilities With an Agreement on All Issues* packet of forms. Review the instructions for the packet of forms before completing the Confidential Information Form.)

**ND Legal Self Help Center Staff and Court employees cannot help you fill out forms. If you are unsure how to proceed, you should consult a lawyer.**

**There is no guarantee that all judges and courts will accept forms available through the ND Legal Self Help Center. Use at your own risk.**

**Do not include this instruction sheet when you serve or file the completed form.**

#### **THE PLAINTIFF AND DEFENDANT WORK TOGETHER TO COMPLETE FORM.**

*Form 4: Confidential Information Form* gives the court the confidential information that cannot be included in any other forms filed in the case. This form remains confidential and is not a public record.

**Top of form (Caption):** Fill in the caption exactly as you filled in the caption on *Form 1: Summons*.

#### **Plaintiff, Defendant and Minor Child(ren) Information:**

- **Full Information Column**

Fill in the full, legal names, birth dates and social security numbers of the Plaintiff, Defendant and each minor child listed in Paragraph 5 of *Form 2: Complaint*.

If a minor child does not have a social security number, type or write "N/A."

If you have more than three minor children together, attach a sheet that lists the information for each additional child.

- **Redacted Information Column**

Fill in the information as it appears in the documents that will be seen by the public.

#### **Date and Signature:**

Sign and date the completed form.

**Do not include this instruction sheet when you serve or file the completed form.**

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF \_\_\_\_\_

\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_  
(Plaintiff)

PLAINTIFF,

Vs

\_\_\_\_\_  
(Defendant)

DEFENDANT. )

Case No. \_\_\_\_\_

CONFIDENTIAL INFORMATION FORM

FULL INFORMATION

REDACTED INFORMATION

PLAINTIFF:

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_

Year of Birth: \_\_\_\_\_  
XXX-XX-\_\_\_\_\_

DEFENDANT:

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_

Year of Birth: \_\_\_\_\_  
XXX-XX-\_\_\_\_\_

MINOR CHILD:

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_

Initials: \_\_\_\_\_  
Year of Birth: \_\_\_\_\_  
XXX-XX-\_\_\_\_\_

MINOR CHILD:

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_

Initials: \_\_\_\_\_  
Year of Birth: \_\_\_\_\_  
XXX-XX-\_\_\_\_\_

MINOR CHILD:

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_

Initials: \_\_\_\_\_  
Year of Birth: \_\_\_\_\_  
XXX-XX-\_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_, Plaintiff  
(Signature of Plaintiff)

\_\_\_\_\_, Defendant  
(Signature of Defendant)