CONFIDENTIAL INFORMATION FORM

Case Records Public Access Policy of the Unified Judicial System of Pennsylvania
204 Pa. Code § 213.81
www.pacourts.us/public-records

_____ _____
(Party name as displayed in case caption) Docket/Case No.

Vs.

_____ _____
(Party name as displayed in case caption) Court

This form is associated with the pleading titled _____, dated_____,_____.

Pursuant to the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*, the Confidential Information Form shall accompany a filing where confidential information is **required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter**. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

This Information Pertains to:	Confidential Information:	References in Filing:
_____ (full name of adult) OR This information pertains to a minor with the initials of ____ and the full name of _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN 1 Alternative Reference: FAN 1 Alternative Reference: DLN 1 Alternative Reference: SID 1
_____ (full name of adult) OR This information pertains to a minor with the initials of ____ and the full name of _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN 2 Alternative Reference: FAN 2 Alternative Reference: DLN 2 Alternative Reference: SID 2

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Additional page(s) attached. _____ total pages are attached to this filing.

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

_____ _____

Signature of Attorney or Unrepresented Party | Date

Name: _____ | Attorney Number: (if applicable) _____

Address: _____ | Telephone: _____

_____ | Email: _____

NOTE: **Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.**

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Additional page (if necessary)

This Information Pertains to:	Confidential Information:	References in Filing:
_____ (full name of adult) OR This information pertains to a minor with the initials of ____ and the full name of _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN ___ Alternative Reference: FAN ___ Alternative Reference: DLN ___ Alternative Reference: SID ___
_____ (full name of adult) OR This information pertains to a minor with the initials of ____ and the full name of _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN ___ Alternative Reference: FAN ___ Alternative Reference: DLN ___ Alternative Reference: SID ___

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Instructions for Completing the Confidential Information Form

The following information is confidential and shall not be included in any document filed with a court or custodian, except on a Confidential Information Form filed contemporaneously with the document:

1. Social Security Numbers

2. Financial Account Numbers, except an active financial account number may be identified by the last four digits when the financial account is the subject of the case and cannot otherwise be identified. "Financial Account Numbers" include financial institution account numbers, debit and credit card numbers, and methods of authentication used to secure accounts such as personal identification numbers, user names and passwords.

3. Driver License Numbers

4. State Identification (SID) Numbers

5. Minors' names and dates of birth except when a minor is charged as a defendant in a criminal matter (see 42 Pa.C.S. § 6355). "Minor" is a person under the age of eighteen.

6. Abuse victim's address and other contact information, including employer's name, address and work schedule, in family court actions as defined by Pa.R.C.P. No. 1931(a), except for victim's name. "Abuse Victim" is a person for whom a protection order has been granted by a court pursuant to Pa.R.C.P. No. 1901 et seq. and 23 Pa.C.S. § 6101 et seq. or Pa.R.C.P. No. 1951 et seq. and 42 Pa.C.S § 62A01 et seq. **If necessary, this information must be provided on the separate Abuse Victim Addendum. Please note there are separate instructions for the completion of the Addendum located on the form.**

Please note this form does not need to be filed in types of cases that are sealed or exempted from public access pursuant to applicable authority (e.g. juvenile, adoption, etc.).

- **The best way to protect confidential information is not to provide it to the court. Therefore, only provide confidential information to the court when it is required by law, ordered by the court or is otherwise necessary to effect the disposition of a matter.**
- Do not include confidential information in any other document filed with the court under this docket.
- If you need to refer to a piece of confidential information in a document, use the alternate references. If you need to attach additional pages, sequentially number each alternate reference – i.e. SSN 3, SSN 4, etc.
- This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

A court or custodian is not required to review or redact any filed document for compliance with the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*. A party's or attorney's failure to comply with this section shall not affect access to case records that are otherwise accessible.

If a filed document fails to comply with the requirements of the above referenced policy, a court of record may, upon motion or its own initiative, with or without a hearing, order the filed document sealed, redacted, amended or any combination thereof; a magisterial district court may, upon request or its own initiative, redact, amend or both. A court of record may impose sanctions, including costs necessary to prepare a compliant document for filing in accordance with applicable authority.

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Abuse Victim Addendum

Instructions for Completing the Abuse Victim Addendum: The Abuse Victim Addendum shall accompany a filing where confidential information is being provided by an abuse victim, as defined in this policy, **in family court actions** (see Pa.R.C.P. No. 1931(a)), **as required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter**. This addendum, and any additional pages, shall only be provided to the court and shall remain confidential. The best way to protect confidential information is not to provide it to the court. Therefore, only provide confidential information to the court when it is required by law, ordered by the court or is otherwise necessary to effect the disposition of a matter.

Type of Family Court Action

☐ Divorce, Annulment, Dissolution of Marriage ☐ Child Custody

☐ Support ☐ Paternity ☐ Protection from Abuse

This Information Pertains to:	Confidential Information:	References in Filing:
_____ (full name of abuse victim)	AV Address: _____	Alternative Reference: AV 1 Address
_____ Docket/Case No. of Protection Order	AV Employer's Name & Address: _____	Alternative Reference: AV 1 Employer's Name & Address
_____ Court/County	AV Work Schedule: _____	Alternative Reference: AV 1 Work Schedule
	AV Other contact information:	Alternative Reference: AV 1 Other contact information

Attach additional page(s) if necessary.

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CONFIDENTIAL INFORMATION FORM

Abuse Victim Addendum

Additional page (if necessary**)**

Type of Family Court Action

☐ Divorce, Annulment, Dissolution of Marriage ☐ Child Custody

☐ Support ☐ Paternity ☐ Protection from Abuse

This Information Pertains to:	Confidential Information:	References in Filing:
_____ (full name of abuse victim)	AV Address: _____	Alternative Reference: AV __ Address
	AV Employer's Name & Address: _____	Alternative Reference: AV __ Employer's Name & Address
_____ Docket/Case No. of Protection Order	AV Work Schedule: _____	Alternative Reference: AV __Work Schedule
_____ Court/County	AV Other contact information:	Alternative Reference: AV __ Other contact information

Type of Family Court Action

☐ Divorce, Annulment, Dissolution of Marriage ☐ Child Custody

☐ Support ☐ Paternity ☐ Protection from Abuse

This Information Pertains to:	Confidential Information:	References in Filing:
_____ (full name of abuse victim)	AV Address: _____	Alternative Reference: AV __ Address
	AV Employer's Name & Address: _____	Alternative Reference: AV __ Employer's Name & Address
_____ Docket/Case No. of Protection Order	AV Work Schedule: _____	Alternative Reference: AV __Work Schedule
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