

CIVIL FILING INFORMATION SHEET

at Kansas City at Independence

file stamp here

CASE #: _____

PARTY PLAINTIFF/PETITIONER		
Last Name:		
First Name:	Middle Initial:	
Social Security Number:		
Address:		
City:	State:	Zip:

LEAD ATTORNEY OF RECORD-PLAINTIFF/PRO SE		
Last Name:		
First Name:	Middle Initial:	
Address:		
City:	State:	Zip:
Phone #:	Fax #:	
MO Bar Number:	E-Mail:	

PARTY DEFENDANT/RESPONDENT		
Last Name:		
First Name:	Middle Initial:	
Social Security Number:		
Address:		
City:	State:	Zip:
Service Instruction for each defendant listed:		
<input type="checkbox"/> Jackson County: <input type="checkbox"/> Private Process <input type="checkbox"/> Out of County--Provide info below Sheriff Name/Address:		

LEAD ATTORNEY OF RECORD-DEFENDANT (if known)		
Last Name:		
First Name:	Middle Initial:	
Address:		
City:	State:	Zip:
MO Bar Number:	E-Mail:	

CIRCUIT CIVIL CASE INFORMATION

Case Type Description:
Case Type Code:
<i>Court Rule 3.1.4-Case Type Code--See Civil Case Codes on Reverse and under the forms section of the Court's website at www.16thcircuit.org</i>

Case Track:
<input type="checkbox"/> Expedited: (Out of state witness, injunction, TRO, extraordinary remedy, replevins, etc.)
<input type="checkbox"/> Standard
<input type="checkbox"/> Complex: (Asbestos, tobacco, or other cases that will likely take more than 2 weeks to try)

OTHER IMPORTANT INFORMATION

- Review Division-Specific Information on the Court's website to understand the requirements in processing your case--www.16thcircuit.org
- **Court Rule 4.2** requires that this form must be **complete** and include a **filing deposit** or your petition will not be accepted for filing
- **Court Rule 3.5 Designated Lead Attorney** requires that each party is responsible for keeping the designated lead attorney information current
- **Court Rule 21.9 Attorney Change of Address/Facsimile** requires each attorney to keep their address, etc. up dated with the Court Administrator's office.

Date: _____ Attorney/Pro Se Signature: /S/ _____