

CASE FILING STATEMENT – Information Only; Not Retained in Case Records

Provide the Case File No. for the record you are filing into or the Case Type if initiating a new action: _____

*A list of case types and party roles can be found here: <https://ujc.sd.gov/Attorneys/FormsDocumentation.aspx>

Social Security Numbers (not Driver’s License Numbers) must be provided for divorce, child support, & paternity cases, 42 USC 666(a)(13)(B). All filers are **required** to provide the SSN **or** DL# for each of **their** participants regardless of the case type. Business entities must provide the EIN number in lieu of SSN or DL#.

INFORMATION FOR PLAINTIFF/PETITIONER/APPLICANT:

| | | | | |
|---|---------------|----------------------|--------|------------------------|
| Last/Business Name | First Name | Middle | Suffix | |
| Physical Address <input type="checkbox"/> Check if Same as Mailing | City | State | Zip | |
| Mailing Address | City | State | Zip | |
| Home | Work | Cell | | |
| Social Security No. | Date of Birth | Driver’s License No. | State | Employer ID (Business) |
| Attorney: | | | | |
| Last Name | First Name | State Bar ID No. | | |
| Mailing Address | City | State | Zip | |
| Phone | | | | |

INFORMATION FOR DEFENDANT/RESPONDENT/MINOR/DECEDENT/PERSON IN NEED OF PROTECTION:

| | | | | | |
|---|---------------|------------------|----------------------|-------|------------------------|
| Last/Business Name | First Name | Middle | Suffix | | |
| Physical Address <input type="checkbox"/> Check if Same as Mailing | City | State | Zip | | |
| Mailing Address | City | State | Zip | | |
| Home | Work | Cell | | | |
| Social Security No. | Date of Birth | Date of Death | Driver’s License No. | State | Employer ID (Business) |
| Attorney: | | | | | |
| Last Name | First Name | State Bar ID No. | | | |
| Mailing Address | City | State | Zip | | |
| Phone | | | | | |