



CIVIL INFORMATION SHEET

The civil information sheet neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Clerk of the District Court for the purposes of initiating the civil docket sheet. This information will not be available to the public and this document will be stored in a separate location from the case file and then destroyed within a reasonable time. A new case **will not be accepted** without a cover sheet attached. (THIS FORM MUST BE TYPED OR PRINTED LEGIBLY). This form can be found at www.kscourts.org.

NATURE OF SUIT (Click or mark in one circle only – If the case involves more than one of the following categories, indicate the category having the highest dollar value)

CIVIL If a CH. 61: \$ _____ (Judgment Demand Amount)

TORT Asbestos Product Liability Automobile Tort Intentional Tort Legal Malpractice Medical Malpractice Other Professional Malpractice Premises Liability Slander/Libel/Defamation Tobacco Product Liability Toxic/Other Product Liability Other Tort	CONTRACT Buyer Plaintiff Employment Dispute - Discrimination Employment Dispute - Other Fraud Landlord/Tenant - Unlawful Detainer Landlord/Tenant Dispute - Other Seller Plaintiff (debt collection) Other Contract	REAL PROPERTY Eminent Domain Mortgage Foreclosure Other Real Property	STATE TAX WARRANT
	CIVIL APPEALS Administrative Agency Other Civil Appeal	MISCELLANEOUS 60-1507 Habeas Corpus Other Writs	OTHER CIVIL
		SMALL CLAIMS	

DOMESTIC

MARRIAGE DISSOLUTION/DIVORCE	PROTECTION FROM ABUSE	PROTECTION FROM STALKING	UIFSA
OTHER DOMESTIC RELATIONS	NON-DIVORCE SUPPORT, CUSTODY OR VISITATION	PATERNITY	

PROBATE/ESTATE

GUARDIAN /CONSERVATOR Conservatorship/Trusteeship Guardianship - Adult Guardianship - Minor Guardian/Conservator - Adult Guardian/Conservator - Minor	DETERMINATION OF DESCENT SEXUALLY VIOLENT PREDATOR DECEDENT ESTATE	ELDER ABUSE OTHER PROBATE / ESTATE CARE AND TREATMENT	ADOPTION
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JURY DEMAND YES (Check yes only if jury demand is included in petition or as a separate pleading) NO

SUMMONS ATTACHED: YES NO

SERVICE BY: PROCESS SERVER/ATTORNEY SHERIFF IN STATE _____ County SHERIFF OUT OF STATE _____ State

SHERIFF'S PROCESS FEE ATTACHED YES NO

PLAINTIFF / SUBJECT INFORMATION
(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____
ADDRESS: _____

PHONE: _____ **SEX:** _____
SSN: _____ **DOB:** _____
DL OR STATE ID NO: _____
State and Number
ALIAS NAMES USED: _____

DEFENDANT / OTHER PARTY INFORMATION
(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____
ADDRESS: _____

PHONE: _____ **SEX:** _____
SSN: _____ **DOB:** _____
DL OR STATE ID NO: _____
State and Number
ALIAS NAMES USED: _____

ATTORNEYS
(Firm Name, Address, Telephone Number and Supreme Court ID Number)

ATTORNEYS (if known)
(Firm Name, Address, Telephone Number and Supreme Court ID Number)

FOR DOMESTIC CASES - NAME, DATE OF BIRTH AND SOCIAL SECURITY NUMBER OF EACH DEPENDENT CHILD:
(Name) (Date of Birth) (Social Security Number)

The requirement that Social Security numbers be included on domestic cases is mandatory, and authorized by the Supreme Court and federal law. On non-domestic cases, the Social Security number is not mandatory. The number is used for purposes of identification and may be disclosed as permitted by law. This form is not considered to be a public record.

ADDITIONAL CIVIL PARTY INFORMATION

PLTF/SUB/DEF/OTHER PTY INFORMATION (CIRCLE ONE)
(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____
ADDRESS: _____

PHONE: _____ SEX: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

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(Firm Name, Address, Telephone Number and Supreme Court ID Number)

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State and Number

ALIAS NAMES USED: _____

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