

Instructions for Supplemental Confidential Information Form

Parenting Responsibility Case (Custody & Visitation) – Case Management

If You List the Last 4 Digits of Financial Account Numbers, or the Last 4 Digits of a Taxpayer Identification Number on Your Witness and Exhibit List, you Must complete and file a supplemental Confidential Information Form.

If this Supplemental Confidential Information Form doesn't fit your circumstances, you may use this as a template to create your own document. If you need help, [contact a lawyer](#).

The Supplemental Confidential Information Form Must be Filled out Completely!!

Don't leave any of the paragraphs within the form unanswered.

If a section of the form doesn't apply to you, type or write "N/A" or "Not Applicable".

If the form isn't completely filled out, it could result in the clerk not accepting your form for filing, or the court may send the form back to you to complete.

Follow and Carefully Read All Instructions! There are boxes (☐) before each step. Check each box as you finish the step. Don't go on to the next step **until** the previous step is completed.

ND Legal Self Help Center Staff and Court employees can't help you fill out forms. If you're unsure how to proceed, [consult a lawyer](#).

ND Legal Self Help Center forms aren't official court forms. Judges and courts aren't required to accept them. There's no guarantee Center forms will be accepted. Use at your own risk.

Don't include these instruction sheets when you serve or file the completed form.

Complete the Supplemental Confidential Information Form

Since the Witness and Exhibit List may include references to confidential information, you may need to prepare a Supplemental Confidential Information form. The form must contain the full confidential information that's referenced in the Witness and Exhibit List.

Court records are generally available to the public, and anyone can request to look in almost any court file. However, certain information is required to remain confidential, even if it's part of a public court record.

This supplemental form gives the court the confidential information that can't be included in any other documents filed in the contested parenting responsibility case. This form remains confidential and isn't a public record.

Only you are responsible for making sure confidential information doesn't appear in the forms and documents you prepare.

Confidential information includes:

- Social security numbers
- Taxpayer identification numbers
- Birthdates
- Full names of minor children
- Financial-account numbers.

Documents filed with the Court with references to confidential information must include only:

- The last four (4) digits of the social security number and taxpayer identification number
- The year of birth
- The minor child's initials
- The last four (4) digits of the financial-account number

☐ **Fill in the Top Part of the Form:** The information to fill out the top part of the form ("Caption") is the same as on the Summons form.

☐ **Full information:** Fill in the name of the account and the **full account number**.

☐ **Redacted information:** Fill in the **last four digits only** of the account number.

☐ **Date and Signature:**

- Sign your name;
- Put a checkmark ☒ in the correct box indicating if you're the Plaintiff or Defendant; and
- Fill in all the lines below your signature.

Make one copy of the Supplemental Confidential Information Form for your records.

Don't serve the Supplemental Confidential Information Form on the other parent.

File your completed Supplemental Confidential Information Form at the same time you file your completed Witness and Exhibit List and Declaration of Service by Mail.

State of North Dakota

In District Court

County of _____

_____ Judicial District

Plaintiff,
vs

Defendant.

Case No. _____

**Supplemental Confidential Information
Form** (*Contested Parenting Responsibility*)

Full Information

Redacted Information

Financial Account Numbers:

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Name of Account: _____

Account Number: _____

Last 4 Digits: _____

Full Information

Redacted Information

Taxpayer ID Number:

Name: _____

ID Number: _____

Last 4 Digits: _____

Dated _____.

_____, ☐ Plaintiff / ☐ Defendant
Signature

Typed or Printed Name

Address

City *State* *Zip Code*

Telephone Number

Email Address