

IN THE SAC & FOX TRIBE OF THE MISSISSIPPI IN IOWA TRIBAL COURT
MESKWAKI SETTLEMENT
307 MESKWAKI RD.
TAMA, IA 52339

COURT STAFF:

Staff Initials (when processing this page) _____

Scan **ONLY THIS PAGE** into database

DO NOT SCAN OR DISTRIBUTE "PAGE 2"

Court Case No/s:

NOTICE OF FILING
"PARTY'S CONFIDENTIAL INFORMATION SHEET"

Notice: Information indicated on "PAGE 2" of this document should not appear in the case files. Information indicated on "PAGE 2" is **RESTRICTED** and should not be publicly accessed, only by Court officials, Tribal Agency Staff, law enforcement, or other attorneys in the case/s.

Name of Person Filing this Notice: _____

Name of Party who needs information withheld: _____

Role of Party in case/s: Petitioner Respondent Other _____

Party Attorney of Record, if any: _____

Party will receive copies of filings in this manner: _____

This Notice is being filed for the following reason/s (check and explain all that are applicable):

There **IS an active Order of Protection or No Contact Order** concerning this Party and (name of other person) _____ . (Attach copy of Order)
Name of Court: _____

There **MIGHT be active Order of Protection/No Contact Order** concerning this Party and (name of other person) _____ . in a different court (Name Court: _____).

The **Party is presently seeking issuance of an Order of Protection/No Contact Order** against (name of other person) _____ . in the Court named: _____ .

Tribal Agency (name of Agency/Dept.) _____ **has reasonable concerns for the safety of this Party,** until further notice. Filer is a representative.

Other: _____

Statement of Filer: "I understand I am responsible for immediately informing the Court of any changes in the status of the reasons indicated above. I understand that the Party having the restricted information is still required to provide current contact information to the Court, to their attorney, and to any Tribal Agency providing services to them, or to any Tribal Agency/Department that is a party in the cases listed above."

Date Signed: _____

Signature of Filer: _____

Cc:

PARTY'S CONFIDENTIAL INFORMATION – RESTRICTION

Information to be restricted:

A. Residential Address: _____
(Physical address)

City State Zip

B. Mailing Address: _____
(if different from above)

City State Zip

C. Social Security Number: _____ - _____ - _____

D. Phone A: () _____ Name, if other than Petitioner _____

Phone B: () _____ Name, if other than Petitioner _____

E. Aliases, nicknames, or previously used names: _____

F. Name of Employer, Location: _____

G. Email address/es _____

H. Other Information important to know (alternate temporary housing, shelter, children's school, law enforcement information, domestic violence case worker, etc.):

COURT STAFF:

Staff Initials (processing "Page 2") _____

DO NOT SCAN "Page 2" into database

Do Not Distribute this page

Date _____