

This is a private record.

Non-public Information – Parent Identification and Location		Case Number _____			
Notice: This information is required by the U.S. Secretary of Health and Human Services. If the information changes, you must complete and file another form. (Utah Code Section 62A-11-304.4.)					
Name		Telephone Numbers (Include area code.)			
		Day	Evening	Cell	
Residential Address					
[] Keep my residential address private and do not provide it to the other party because there is reason to believe that releasing the information may result in physical or emotional harm to me or to my child. (If you check this box, omit your residential address from this document and from all other papers filed with the court. Include it on the Safeguarded Address form.)					
Mailing Address (if different from residential address)					
Date of Birth		Social Security Number		Driver's License	
				State	Number
Employer Name, Address and Telephone Number					
Employer Name, Address and Telephone Number					
I am: (check all that apply) [] Petitioner [] Respondent [] Custodial Parent [] Non-custodial Parent [] Filing this information about myself [] Filing this information about the other party					

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date _____ Sign here ► _____
Typed or printed name _____