
Using This Revisable PDF Form

1. Attachments - As appropriate, copies of the following document(s) should be attached to this form as noted in Data Elements 5 and 6.
 - a. Petition
 - b. Motion
 - c. Other Pleading, if applicable
 - d. Order
 - e. Decree
 - f. Agreement(s) of the Parties
 - g. Transcripts
 - h. Other document(s), if applicable
2. Preparation details.
 - a. This form is used by a party or attorney to file social security numbers and dates of birth of the parties and minor children and financial information of the parties that is required to be filed and otherwise would be included in a petition, motion, other pleading, order, decree, agreement(s) or transcripts or other document filed under Chapter 6 of Title 20 of the Code of Virginia. Financial information of any party to list on this form includes identifying account numbers for specific assets, liabilities, accounts and credit cards.
 - b. The attorney or party who prepares or submits a petition, motion, other pleading, order, decree, agreement(s) or transcripts or other document must ensure that any such protected information is removed from the document prior to filing the document with the clerk and included on this form.
 - c. Attach additional sheets to this form for other information, as needed.

ADDENDUM FOR PROTECTED IDENTIFYING INFORMATION—CONFIDENTIAL

Commonwealth of Virginia

Case No. **1**

In the Circuit Court of the [] City [] County of **2**

3 v. **4**

This addendum is filed with and incorporated by reference in the document(s) indicated below, from which the protected identifying information contained herein has been removed by the attorney or party whose signature appears below. This addendum shall be used to distribute such information only as required by law, and may be made available only to the parties, to their attorneys, and to other person(s) as the court may allow.

5 [] Complaint [] Petition [] Motion [] Order [] Decree [] Other Pleading: **6**

[] Agreement(s) of the Parties [] Transcripts [] Other: **6**

7
PARTY NAME (LAST, FIRST, MIDDLE)

9
ADDRESS

8
PARTY NAME (LAST, FIRST, MIDDLE)

10
ADDRESS

11
SOCIAL SECURITY NUMBER

12
DATE OF BIRTH

13
SOCIAL SECURITY NUMBER

14
DATE OF BIRTH

NAME OF ASSET, LIABILITY, ACCOUNT, CREDIT CARD	IDENTIFYING ACCOUNT NO.
15	16

NAME OF ASSET, LIABILITY, ACCOUNT, CREDIT CARD	IDENTIFYING ACCOUNT NO.
17	18

19
CHILD NAME (LAST, FIRST, MIDDLE)

20
SOCIAL SECURITY NUMBER

21
DATE OF BIRTH

22
CHILD NAME (LAST, FIRST, MIDDLE)

23
SOCIAL SECURITY NUMBER

24
DATE OF BIRTH

Attach additional sheet(s) for other information, as needed.

25
DATE

26
[] PARTY [] ATTORNEY

27
PRINT NAME ADDRESS /TELEPHONE NUMBER OF SUBSCRIBER

Data Elements

- | | |
|---|---|
| 1. Court case number. | 16. List identifying account numbers for items listed in Data Element 15. |
| 2. Check box to indicate city or county and enter name of court. | 17. List names of assets, liabilities, accounts and credit cards of party listed in Data Element 8. |
| 3. Name of plaintiff. | 18. List identifying account numbers for items listed in Data Element 17. |
| 4. Name of defendant. | 19. Enter name of child. |
| 5. Check appropriate box indicating the type of document this addendum is being filed with. | 20. Enter social security number of child listed in Data Element 19. |
| 6. If box for “Other Pleading” or “Other” is checked, identify the document that is being filed. | 21. Date of birth of child listed in Data Element 19. |
| 7. Enter name of party whose information is listed in Data Element 3. | 22. Enter name of second child, if applicable. |
| 8. Enter name of party whose information is listed in Data Element 4. | 23. Enter social security number of child listed in Data Element 22. |
| 9. Address of party listed in Data Element 7. | 24. Date of birth of child listed in Data Element 22. |
| 10. Address of party listed in Data Element 8. | 25. Date form is signed. |
| 11. Social Security number of party listed in Data Element 7. | 26. Signature of party or attorney signing form. Signature not entered online check applicable box to indicate party or attorney as subscriber. |
| 12. Date of birth of party listed in Data Element 7. | 27. Printed name, address and telephone number of party or attorney signing form. |
| 13. Social Security number of party listed in Data Element 8. | |
| 14. Date of birth of party listed in Data Element 8. | |
| 15. List names of assets, liabilities, accounts and credit cards of party listed in Data Element 7. | |