Nebraska State Court Form	**SOCIAL SECURITY NUMBERS, GENDER, AND BIRTH DATE(S)**	DC 6:5(12) NEW 12/08 Neb. Ct. R. § 6-1521

IN THE DISTRICT COURT OF _____ COUNTY, NEBRASKA
(county where original action was filed)

THIS DOCUMENT IS CONFIDENTIAL AND SHALL NOT BE MADE PART OF THE CASE FILE OR PROVIDED TO THE PUBLIC

Case No. CI _____
(case number assigned by Clerk of Court)

_____,
(name of person listed as plaintiff/petitioner in original action)

Plaintiff/Petitioner,

SOCIAL SECURITY NUMBERS, GENDER, AND BIRTH DATE(S)

vs.

_____,
(name of person listed as defendant/respondent in original action)

Defendant/Respondent.

Names	**Social Security Number**	**Gender**	**Date of Birth**
Plaintiff /Petitioner:			
_____	_____	_____	_____
Defendant/Respondent:			
_____	_____	_____	_____
Minor Children:			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(For other information, add pages as required.)