

**CERTIFICATE OF COMPLIANCE**

**RE: ACCESS TO COURT CASE RECORDS**

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Attorney No. (If applicable) \_\_\_\_\_

Phone No. \_\_\_\_\_

**CONFIDENTIAL  
DOCUMENT FORM**



**APPELLATE/TRIAL COURT  
CASE RECORDS**

*Public Access Policy of the Unified Judicial System of Pennsylvania:  
Case Records of the Appellate and Trial Courts  
204 Pa. Code § 213.81  
[www.pacourts.us/public-records](http://www.pacourts.us/public-records)*

\_\_\_\_\_  
(Party name as displayed in case caption)

\_\_\_\_\_  
Docket/Case No.

Vs.

\_\_\_\_\_  
(Party name as displayed in case caption)

\_\_\_\_\_  
Court

This form is associated with the pleading titled \_\_\_\_\_, dated \_\_\_\_\_.

Pursuant to the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts*, the Confidential Document Form shall accompany a filing where a confidential document is required by law, ordered by the court, or is otherwise necessary to effect the disposition of a matter. This form shall be accessible to the public, however the documents attached will not be publicly accessible, except as ordered by a court. The documents attached will be available to the parties, counsel of record, the court, and the custodian. **Please only attach documents necessary for the purposes of this case.** Complete the entire form and check all that apply. This form and any additional pages must be served on all unrepresented parties and counsel of record.

Type of Confidential Document	Paragraph, page, etc. where the confidential document is referenced in the filing:
<input type="checkbox"/> Financial Source Documents	
<input type="checkbox"/> Tax Returns and schedules	
<input type="checkbox"/> W-2 forms and schedules including 1099 forms or similar documents	
<input type="checkbox"/> Wage stubs, earning statements, or other similar documents	
<input type="checkbox"/> Credit card statements	
<input type="checkbox"/> Financial institution statements (e.g., investment/bank statements)	
<input type="checkbox"/> Check registers	
<input type="checkbox"/> Checks or equivalent	
<input type="checkbox"/> Loan application documents	
<input type="checkbox"/> Minors' educational records	
<input type="checkbox"/> Medical/Psychological records	
<input type="checkbox"/> Children and Youth Services' records	
<input type="checkbox"/> Marital Property Inventory and Pre-Trial Statement as provided in Pa.R.C.P. No. 1920.33	
<input type="checkbox"/> Income and Expense Statement as provided in Pa.R.C.P. No. 1910.27(c)	
<input type="checkbox"/> Agreements between the parties as used in 23 Pa.C.S. §3105	

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

\_\_\_\_\_  
Signature of Attorney or Unrepresented Party

\_\_\_\_\_  
Date

Name: \_\_\_\_\_

Attorney Number: (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

**CONFIDENTIAL  
INFORMATION  
FORM**



**APPELLATE/TRIAL COURT  
CASE RECORDS**

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(Party name as displayed in case caption)

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Docket/Case No.

Vs.

\_\_\_\_\_  
(Party name as displayed in case caption)

\_\_\_\_\_  
Court

This form is associated with the pleading titled \_\_\_\_\_, dated \_\_\_\_\_.

Pursuant to the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts*, the Confidential Information Form shall accompany a filing where confidential information is **required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter**. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

<b>This Information Pertains to:</b>	<b>Confidential Information:</b>	<b>References in Filing:</b>
_____ (full name of adult)  OR This information pertains to a minor with the initials of _____ and the full name of _____  _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN 1  Alternative Reference: FAN 1  Alternative Reference: DLN 1  Alternative Reference: SID 1
_____ (full name of adult)  OR This information pertains to a minor with the initials of _____ and the full name of _____  _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN 2  Alternative Reference: FAN 2  Alternative Reference: DLN 2  Alternative Reference: SID 2



**Abuse Victim Addendum**

**Instructions for Completing the Abuse Victim Addendum:** The Abuse Victim Addendum shall accompany a filing where confidential information is being provided by an abuse victim, as defined in this policy, in family court actions (see Pa.R.C.P. No. 1931(a)), as required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter. This addendum, and any additional pages, shall only be provided to the court and shall remain confidential. The best way to protect confidential information is not to provide it to the court. Therefore, only provide confidential information to the court when it is required by law, ordered by the court or is otherwise necessary to effect the disposition of a matter.

<b>Type of Family Court Action</b>		
<input type="checkbox"/> Divorce, Annulment, Dissolution of Marriage <input type="checkbox"/> Child Custody <input type="checkbox"/> Support <input type="checkbox"/> Paternity <input type="checkbox"/> Protection from Abuse		
This Information Pertains to:	Confidential Information:	References in Filing:
<hr/> (full name of abuse victim) <hr/> Docket/Case No. of Protection Order <hr/> Court/County	AV Address: <hr/> AV Employer's Name & Address: <hr/> AV Work Schedule: <hr/> AV Other contact information: <hr/>	Alternative Reference: AV 1 Address  Alternative Reference: AV 1 Employer's Name & Address  Alternative Reference: AV 1 Work Schedule  Alternative Reference: AV 1 Other contact information

Attach additional page(s) if necessary.



**Abuse Victim Addendum**  
Additional page (if necessary)

<b>Type of Family Court Action</b>		
<input type="checkbox"/> Divorce, Annulment, Dissolution of Marriage	<input type="checkbox"/> Child Custody	
<input type="checkbox"/> Support	<input type="checkbox"/> Paternity	<input type="checkbox"/> Protection from Abuse
<b>This Information Pertains to:</b>	<b>Confidential Information:</b>	<b>References in Filing:</b>
<hr/> (full name of abuse victim)	AV Address: <hr/>	Alternative Reference: AV __ Address
<hr/> Docket/Case No. of Protection Order	AV Employer's Name & Address: <hr/>	Alternative Reference: AV __ Employer's Name & Address
<hr/> Court/County	AV Work Schedule: <hr/>	Alternative Reference: AV __ Work Schedule
	AV Other contact information: <hr/>	Alternative Reference: AV __ Other contact information

<b>Type of Family Court Action</b>		
<input type="checkbox"/> Divorce, Annulment, Dissolution of Marriage	<input type="checkbox"/> Child Custody	
<input type="checkbox"/> Support	<input type="checkbox"/> Paternity	<input type="checkbox"/> Protection from Abuse
<b>This Information Pertains to:</b>	<b>Confidential Information:</b>	<b>References in Filing:</b>
<hr/> (full name of abuse victim)	AV Address: <hr/>	Alternative Reference: AV __ Address
<hr/> Docket/Case No. of Protection Order	AV Employer's Name & Address: <hr/>	Alternative Reference: AV __ Employer's Name & Address
<hr/> Court/County	AV Work Schedule: <hr/>	Alternative Reference: AV __ Work Schedule
	AV Other contact information: <hr/>	Alternative Reference: AV __ Other contact information

**CONFIDENTIAL  
INFORMATION  
FORM**



**APPELLATE/TRIAL COURT  
CASE RECORDS**

Additional page (if necessary)

<b>This Information Pertains to:</b>	<b>Confidential Information:</b>	<b>References in Filing:</b>
<p>_____</p> <p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____</p> <p>(full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver's License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN _____</p> <p>Alternative Reference: FAN _____</p> <p>Alternative Reference: DLN _____</p> <p>Alternative Reference: SID _____</p>
<p>_____</p> <p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____</p> <p>(full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver's License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN _____</p> <p>Alternative Reference: FAN _____</p> <p>Alternative Reference: DLN _____</p> <p>Alternative Reference: SID _____</p>

**CONFIDENTIAL  
INFORMATION  
FORM**



**APPELLATE/TRIAL COURT  
CASE RECORDS**

Additional page(s) attached. \_\_\_\_\_ total pages are attached to this filing.

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

\_\_\_\_\_  
Signature of Attorney or Unrepresented Party

\_\_\_\_\_  
Date

Name: \_\_\_\_\_

Attorney Number: (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.**



Public Access Policy of the Unified Judicial System of Pennsylvania:
Case Records of the Appellate and Trial Courts
204 Pa. Code § 213.81
www.pacourts.us/public-records

DATE OF REQUEST: \_\_\_\_\_

REQUESTOR INFORMATION:

NAME: \_\_\_\_\_ DAYTIME TELEPHONE NUMBER: ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_
\_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ FAX NUMBER: ( ) \_\_\_\_\_

REQUESTING CASE RECORD FROM:

Form with checkboxes for Supreme Court, Superior Court, Commonwealth Court, Court of Common Pleas, and Philadelphia Municipal Court (excluding Traffic Division).

DESCRIBE INFORMATION REQUESTED: (See instructions on following page)

Four horizontal lines for describing the information requested.

Table with 3 columns: Official Use Only, CHARGE, and Comments. Rows include Date Received and Tracking Number (if applicable) / Total Cost.





**INSTRUCTIONS FOR OBTAINING A CASE RECORD OF THE APPELLATE OR TRIAL COURT**

1. A requestor shall identify or describe the record sought with specificity to enable the custodian to ascertain which record is being requested.
2. The completed form shall be submitted to the appropriate custodian. Incomplete forms may result in delayed access to the requested record.
3. The requestor may be charged reasonable fees for access to court records. Fees for duplication by photocopying or printing from electronic media or microfilm shall not exceed \$ .50 per page, unless otherwise provided by applicable authority.
4. Requests will be completed as promptly as possible under the circumstances existing at the time of the request. If the custodian cannot fulfill the request promptly or at all, the custodian shall inform the requestor of the specific reason(s) why access to the information is being delayed or denied.
5. If a request is denied by the custodian, relief may be sought by filing a motion or application with the court for which the custodian maintains the records.

**For Court Use Only**

Your request was received on \_\_\_/\_\_\_/\_\_\_ . In accordance with the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts*, please be advised that:

- this request is being returned to you because it does not contain sufficient information to evaluate your request. No further action will be taken unless you resubmit the request with additional information.
- the information/record does not exist.
- the information/record is not a case record as defined by the Policy.
- you have failed to properly complete the Request Form.
- Other \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**



# Protecting Confidential Information - Here's How

Effective January 6, 2018

A certification shall accompany each filing in accordance with the policy. A court or custodian is not required to review or redact any filed document for compliance with this policy. Failure to comply may lead to imposed sanctions.

## Confidential Information

Unless required by applicable authority, two versions of every document must be filed with the court: a "Redacted Version" (not including the items listed below) and an "Unredacted Version." Redactions must be made in a manner that is visibly evident to the reader.

### 1. Social Security Numbers

2. Financial Account Numbers except an active financial account number may be identified by the last four digits when the financial account is the subject of the case and cannot otherwise be identified.

### 3. Driver License Numbers

### 4. State Identification (SID) Numbers

5. Minors' Names and Dates of Birth except when a minor is charged as defendant in a criminal matter (see 42 Pa.C.S. §6355)

6. Abuse Victim's Address and other Contact Information including employer's name, address, and work schedule, in family court actions as defined by Pa.R.C.P. No. 1931(a), except for victim's name

## Confidential Documents

Unless required by applicable authority, the following documents shall be filed with a court or custodian with the "Confidential Document Form."

### 1. Financial Source Documents

### 2. Minors' Educational Records

### 3. Medical/Psychological Records

### 4. Children and Youth Services' Records

5. Marital Property Inventory and Pre-Trial Statement as provided in Pa.R.C.P. No. 1920.33

6. Income and Expense Statement as provided in Pa.R.C.P. No. 1910.27(c)

7. Agreements between the Parties as used in 23 Pa.C.S. §3105

These requirements do not apply to case types (e.g. juvenile, adoption) that are sealed or exempted from public access pursuant to applicable authority.

For forms and more information, reference the Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts at the website below.



Please visit: <http://www.pacourts.us/public-record-policies>