

Your Name: _____
Address: _____
City, State, Zip _____
Telephone: _____
Email Address: _____
Self-Represented

DISTRICT COURT
_____ **COUNTY, NEVADA**

_____ Plaintiff / Joint Petitioner, and _____ Defendant / Joint Petitioner.	CASE NO.: _____ DEPT: _____
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CONFIDENTIAL INFORMATION SHEET – DOMESTIC

Pursuant to NRS 125.130(3), the parties' social security numbers are provided below.
This information shall not be part of the public record and shall be maintained in a confidential manner by the Clerk of Court.

First Spouse Name: _____

Social Security Number: _____

Date of Birth: _____

Second Spouse Name: _____

Social Security Number: _____

Date of Birth: _____

DATED this (*day*) _____ day of (*month*) _____, 20____.

Submitted By: (*Signature*) ▶ _____