Addendum to Confidential Information Form (AD)						
The information below is subject to limited disclosure. It may be disclosed to governmental agencies						
without notice to you; but will not be disclosed to other parties or the public unless allowed by law.						
County: Cause Number:						Do not file in a
Court Clerk: This is a Restricted Access Document						public access file.
List the address where notices can be sent to you. This does not have to be your home address. This address will become public. I am \Box Petitioner \Box Respondent. My public mailing address (P.O. Box/Street, City, State, Zip):						
The following information about additional parties is required in all cases.						
Additional Petitioner Information Type or Print Only Additional Respondent Information						
Name (Last, First, Middle)			Name (Last, first, Middle)			
Race Se	ex Bi	rthdate	Race		Sex	Birthdate
Drivers Lic. or Identicard (# and State) Drivers Lic. or Identicard (# and State), (or, if unavailable, residential address)						ate), (or, if
Relationship to Child(ren)	Relationship to Child(ren)					
The following information is required if there are additional children involved in the proceeding. (Soc. Sec. No. is not required for petitions in protection order cases (Domestic Violence/Antiharassment/Sexual Assault).) 3) Child's Name (Last, First, Middle) Child's Race/Sex/Birthdate Child's Soc. Sec. No. (If required) Child's Name (Last, First, Middle) Child's Name (Last, First, Middle) Child's Soc. Sec. No. (If required) Child's Name (Last, First, Middle) Child's Soc. Sec. No. (If required) Child's Race/Sex/Birthdate Child's Race/Sex/Birthdate Child's Present Address or Whereabouts 4) Child's Race/Sex/Birthdate Child's Present Address or Whereabouts Child's Present Address or Whereabouts Except for petitions in protection order cases (Domestic Violence/Antiharassment/						
Sexual Assault), the following information <u>is required</u> :						
Additional Petitioner Information Additional Respondent Information						
Soc. Sec. No.:			Soc. Sec. No.:			
Residential Address (Street, City, State, Zip)			Residential Address (Street, City, State, Zip)			
E-mail Address:			E-mail Address:			
Telephone No.: ()			Telephone No.: ()			
Employer:			Employer:			
Empl. Address:	Empl. Address:					
Empl. Phone No.: ()			Empl. Phone No.: ()			

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