

CIVIL/FAMILY CASE COVER SHEET

CAUSE NUMBER: _____ COURT _____

STYLED _____

(e.g., John Smith v. All American Insurance Co; In re Mary Ann Jones; In the matter of the Estate of George Jackson)

This cover sheet should be completed and filed with the original petition or, in a family law case, when a petition for modification or enforcement is filed. The information should be the best available at the time of filing, understanding that the information may change before trial. This information does not constitute a discovery request, response, or supplementation, and is not admissible at trial.

1. Contact information for person completing case information sheet:		Names of parties in case:		Person completing cover sheet is:	Service Type
Name: _____ Email: _____		Plaintiff(s)/Petitioner(s): _____ _____		<input type="checkbox"/> Attorney for Plaintiff/Petitioner <input type="checkbox"/> Plaintiff/Petitioner	<input type="checkbox"/> Certified Mail <input type="checkbox"/> None <input type="checkbox"/> Personal Service <input type="checkbox"/> Posting <input type="checkbox"/> Publication <input type="checkbox"/> Waiver of Service to be filed
Address: _____ Telephone: _____		Defendant(s)/Respondent(s): _____ _____			
City/State/Zip: _____ Fax: _____				Discovery Level	
Signature: _____ State Bar No: _____				<input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3	
[Attach additional page as necessary to list all parties]					
2. Indicate case type, or identify the most important issue in the case (select only 1):					
<i>Civil</i>			<i>Family Law</i>		
Contract	Injury or Damage	Real Property	Marriage Relationship	Post-judgment Actions (non Title IV-D)	
<i>Debt/Contract</i> <input type="checkbox"/> Consumer/DTPA <input type="checkbox"/> Debt/Contract <input type="checkbox"/> Fraud/Misrepresentation <input type="checkbox"/> Other Debt/Contract: _____	<input type="checkbox"/> Assault/Battery <input type="checkbox"/> Construction <input type="checkbox"/> Defamation <i>Malpractice</i> <input type="checkbox"/> Accounting <input type="checkbox"/> Legal <input type="checkbox"/> Medical <input type="checkbox"/> Other Professional Liability: _____ <input type="checkbox"/> Motor Vehicle Accident <input type="checkbox"/> Premises <input type="checkbox"/> Product Liability List Product: _____ <input type="checkbox"/> Other Injury or Damage: _____	<input type="checkbox"/> Eminent Domain/Condemnation <input type="checkbox"/> Partition <input type="checkbox"/> Quiet Title <input type="checkbox"/> Trespass to Try Title <input type="checkbox"/> Other Property: _____	<input type="checkbox"/> Annulment <input type="checkbox"/> Declare Marriage Void <i>Divorce</i> <input type="checkbox"/> With Children <input type="checkbox"/> No Children	<input type="checkbox"/> Enforcement <input type="checkbox"/> Modification—Custody <input type="checkbox"/> Modification—Other	
<i>Foreclosure</i> <input type="checkbox"/> Home Equity – Expedited <input type="checkbox"/> Other Foreclosure <input type="checkbox"/> Franchise <input type="checkbox"/> Insurance <input type="checkbox"/> Landlord/Tenant <input type="checkbox"/> Non-Competition <input type="checkbox"/> Partnership <input type="checkbox"/> Other Contract: _____		Related to Criminal Matters	Other Family Law	Title IV-D	
		<input type="checkbox"/> Expunction <input type="checkbox"/> Judgment Nisi <input type="checkbox"/> Non-Disclosure <input type="checkbox"/> Seizure/Forfeiture <input type="checkbox"/> Writ of habeas corpus – pre-indictment <input type="checkbox"/> Other: _____	<input type="checkbox"/> Enforce Foreign Judgment <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Name Change <input type="checkbox"/> Protective Order <input type="checkbox"/> Removal of Disabilities of Minority <input type="checkbox"/> Other: _____	<input type="checkbox"/> Enforcement/Modification <input type="checkbox"/> Parentage <input type="checkbox"/> Reciprocals (UIFSA) <input type="checkbox"/> Support Order	
Employment	Other Civil	Tax	Parent-Child Relationship		Family Law Case Management (complete if family law case):
<input type="checkbox"/> Discrimination <input type="checkbox"/> Retaliation <input type="checkbox"/> Termination <input type="checkbox"/> Worker's Compensation <input type="checkbox"/> Other Employment: _____	<input type="checkbox"/> Administrative Appeal <input type="checkbox"/> Antitrust/Unfair Competition <input type="checkbox"/> Code Violations <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Intellectual Property <input type="checkbox"/> Lawyer Discipline <input type="checkbox"/> Perpetuate Testimony <input type="checkbox"/> Securities/Stock <input type="checkbox"/> Tortious Interference <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tax Appraisal <input type="checkbox"/> Tax Delinquency <input type="checkbox"/> Other Tax	<input type="checkbox"/> Adoption/Adoption with Termination <input type="checkbox"/> Child Protection <input type="checkbox"/> Child Support <input type="checkbox"/> Custody or Visitation <input type="checkbox"/> Gestational Parenting <input type="checkbox"/> Grandparent Access <input type="checkbox"/> Parentage <input type="checkbox"/> Termination of Parental Rights <input type="checkbox"/> Other Parent-Child: _____		<input type="checkbox"/> Uncontested (finalized within 6 months of filing) <input type="checkbox"/> Contested (finalized within 1 year of filing) <i>Requested Temporary Hearing</i> <input type="checkbox"/> None <input type="checkbox"/> TRO Only <input type="checkbox"/> Temporary Orders Only <input type="checkbox"/> TRO & Temporary Orders <i>Estimated Length of Temporary Hearing</i> <input type="checkbox"/> <30 Minutes <input type="checkbox"/> 30-60 Minutes <input type="checkbox"/> 1-2 Hours <input type="checkbox"/> ½ Day
Probate & Mental Health			4. Indicate procedure or remedy, if applicable (may select more than 1):		
<input type="checkbox"/> Guardianship – Adult <input type="checkbox"/> Guardianship – Minor <input type="checkbox"/> Mental Health <input type="checkbox"/> Other: _____		<i>Probate/Wills/Intestate Admin</i> <input type="checkbox"/> Dependent Admin <input type="checkbox"/> Independent Admin <input type="checkbox"/> Other Estate Proceedings		<input type="checkbox"/> Appeal from Municipal/Justice Court <input type="checkbox"/> Attachment <input type="checkbox"/> Bill of Review <input type="checkbox"/> Certiorari <input type="checkbox"/> Class Action <input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Garnishment <input type="checkbox"/> Interpleader	
3. Has this case been previously filed, or does it relate to a case previously filed, in this county, or in another county or state?			<input type="checkbox"/> License <input type="checkbox"/> Mandamus <input type="checkbox"/> Post-Judgment <input type="checkbox"/> Prejudgment Remedy <input type="checkbox"/> Protective Order <input type="checkbox"/> Receiver <input type="checkbox"/> Sequestration <input type="checkbox"/> TRO/Injunction <input type="checkbox"/> Turnover		
<input type="checkbox"/> No <input type="checkbox"/> Yes, in this county; Court: _____ Cause # _____ <input type="checkbox"/> Yes, in another county or state; County: _____ State: _____ Cause # _____					