Print Form

IN THE COURT OF COMMON PLEAS, LUCAS COUNTY, OHIO

PERSONAL IDENTIFIERS
Pursuant to Rule 45 of the Rules of Superintendence

_____ Plaintiff/Petitioner

SSN#_____

EID#_____

Financial Account Numbers

_____

_____

_____

_____ Judge

_____ Case Number

Please use this side of the form for additional defendants.

_____ Defendant/Respondent

SSN#_____

EID#_____

Financial Account Numbers

_____

_____

_____

_____ Defendant

SSN#_____

EID#_____

_____ Defendant

SSN#_____

EID#_____

Completed by: [ ] Plaintiff/Petitioner's Attorney
[ ] Defendant's/Respondent's Attorney

[ ] Plaintiff/Petitioner
[ ] Defendant/Respondent

Name_____

Address_____

City_____State Alabama Zip Code_____

Telephone_____