

General Civil Filing Information Form (Non-Domestic)

Court _____ **County** _____
 Superior **Docket #** _____
 State _____

Date Filed _____

Plaintiff(s)

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

No. of Plaintiffs _____

Plaintiff/Petitioner's Attorney **Pro Se**

Last First Middle I. Suffix

Bar # _____

Defendant(s)

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

No. of Defendants _____

Check Primary Type (Check only **ONE**)

- Contract/Account**
- Wills/Estate**
- Real Property**
- Dispossessory/Distress**
- Personal Property**
- Equity**
- Habeas Corpus**
- Appeals, Reviews**
- Post Judgement Garnishment, Attachment, or Other Relief**
- Non-Domestic Contempt**
- Tort (If tort, fill in right column)**
- Other General Civil (Specify)** _____

If tort is Case type: (Check no more than **TWO**)

- Auto Accident**
- Premises Liability**
- Medical Malpractice**
- Other Professional Negligence**
- Product Liability**
- Other (Specify)** _____

Are Punitive Damages Pleaded? Yes
 No

I hereby certify that the documents in this filing (including attachments and exhibits) satisfy the requirements for redaction of personal or confidential information in **O.C.G.A. 9-11-7.1**