

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR CLACKAMAS COUNTY  
Civil Division – 807 Main St. Oregon City, OR 97045 503-655-8447  
(court's address and phone number)

Case name:	)	CASE No. _____
Plaintiff Name	)	<b>UTCR 2.100 SEGREGATED INFORMATION SHEET</b>
v.	)	
1 <sup>ST</sup> Defendant Name	)	
	)	

**ATTENTION COURT STAFF: Except as your trial court administrator tells you otherwise, this sheet and its attachments are:**

- **to be maintained separately from the attached request, and**
- **NOT placed in any court file where they can be seen by the public, and**
- **NOT provided to any member of the public to see or copy.**

**PLEASE follow UTCR and Judicial Department instructions for protecting information on this form. Ask your trial court administrator if you have questions.**

The requestor MUST complete all of the following information:

1. **Requestor information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Other contact information: \_\_\_\_\_

Relationship to case: Petitioner

2. Protected personal information that is segregated:

Row number used to identify on request	<b>General</b> description of the protected personal information ( <i>same as on request</i> )	Relates to ( <i>Person's name</i> )	The following is the specific Protected Personal Information to be segregated ( <i>give the specific fact, e.g. Social Security number, that is being protected</i> ). This can be a reference to an attachment. <b><u>Do not use for contact information</u></b> ( <i>addresses, telephone numbers, employer identification, and similar information that can be used to contact someone</i> ) unless specifically ordered by a court. The type of information that can be protected by this form is limited to what is listed in UTCR 2.100. Add rows as necessary.
1	DOB		Petitioner's Date of Birth:

3. There are attachments to this information sheet: X No  
If so, how many pages N/A

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For Office use: