

**CONFIDENTIAL CASE FILING INFORMATION SHEET – CRIMINAL**

County/City of St. Louis:				Filing Date:	
<b>STATE V.</b>					
<b>DEFENDANT INFORMATION:</b>					
Last Name:		First Name:		Middle Name/Init:	
Mailing Address:					
City:		State:		Zip Code:	
Date of Birth:		SSN: (Required)			
Race:	Gender:	Height:	Weight:	Hair:	Eyes:
<b>CHARGE INFORMATION:</b>					
Count I	Charge:			Charge Code:	
Count II	Charge:			Charge Code:	
Count III	Charge:			Charge Code:	
Count IV	Charge:			Charge Code:	
Count V	Charge:			Charge Code:	
Count VI	Charge:			Charge Code:	
<b>USE BACK OF SHEET IF ADDITIONAL SPACE IS NEEDED.</b>					
OCN:			Arrest Date:		
Arresting Officer:			Badge No.:		
ORI:			Agency:		
Submitted By:			Bar ID:		
Prosecuting Attorney:			Phone:		