The civil reporting form and the information contained herein shall not be admissible as evidence in any court proceeding or replace or supplement the filing and service of pleadings, orders, or other papers as required by law or Supreme Court Rule. This form is required pursuant to Administrative Order Number 8. Instructions are available at <https://courts.arkansas.gov>.

**County:** **District: Filing Date:**

**Judge: Division: Case ID:**

**Type of case (select one that best describes the subject matter)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Torts** | | **Real Property** | | **Miscellaneous Civil** | |
| □ (NM) Automobile | | □ (CD) Condemnation/Eminent | | □ (AP) Administrative Appeal | |
| □ (IT) Intentional | | Domain | | □ (AR) Petition to Seal Arrest | |
| □ (MP) Malpractice – Medical | | □ (UD) Landlord/Tenant –  Unlawful Detainer | | Record | |
| □ (MO) Malpractice – Other | | □ (EL) Election | |
| □ (LP) Premises – Liability | | □ (UO) Landlord/Tenant –  Other | | □ (FV) Foreign Judgment – Civil | |
| □ (PL) Product Liability | | □ (FR) Fraud | |
| □ (DF) Slander/Libel/  Defamation | | □ (FC) Mortgage Foreclosure | | □ (IJ) Injunction | |
| □ (QT) Real Property – Other | | □ (NC) Name Change | |
| □ (OD) Torts – Other | |  | | □ (CF) Property Forfeiture | |
| **Contracts** | |  | | □ (RF) Register AR Judgment | |
| □ (BP) Buyer Plaintiff | |  | | □ (TS) Petition to Terminate Sex | |
| □ (EM) Employment Discrimination | | | | Offender Registration Req. - | |
| □ (EO) Employment – Other | |  | | Out of State Judgment | |
| □ (DO) Seller Plaintiff (Debt Collection) | | | | □ (WT) Writ - Other | |
| □ (OC) Contract – Other | | | | □ (OM) Civil – Other | |
|  | | | |  | |
| **Plaintiff** | | | **Defendant** | | |
| **Company/**  **Last Name** |  | | **Company/**  **Last Name** | |  |
| Suffix |  | | Suffix | |  |
| **First Name** |  | | **First Name** | |  |
| DL/State ID |  | | DL/State ID | |  |
| Address |  | | Address | |  |
| City, State ZIP |  | | City, State ZIP | |  |
| Phone |  | | Phone | |  |
| Email |  | | Email | |  |
| Self-represented | □ Yes □ No | | Self-represented | | □ Yes □ No |
| DOB |  | | DOB | |  |
| Interpreter needed? | □ Yes:  □ No (language) | | Interpreter needed? | | □ Yes:  □ No (language) |

**Attorney of Record**: **Bar #**:

For the: □ Plaintiff □ Defendant □ Intervenor **Email Address:**

**Related Case(s):** Judge: Case ID(s):

**Manner of filing (choose one)**: □ (MFO) Original □ (MFR+case type) Re-open

□ (MFT) Transfer □ (MFF) Reactivate