# **TRUANCY E-FILING**

2024 - 2025 SCHOOL YEAR LORAIN COUNTY JUVENILE COURT

# **SECTION 1**

## HOW TO CREATE AN E-FILE ACCOUNT

IF YOU ALREADY HAVE AN ACCOUNT PLEASE MOVE TO SECTION 2 CLICK THE "NON ATTORNEY EFILING REGISTRATION" LINK IN THE TOP LEFT CORNER OF THE SCREEN



CourtVIEW	



Home eFile

#### Email

Thank you for registering. Please enter your email address.

Email *		
Next >	Cancel	

ENTER YOUR EMAIL ADDRESS AND THEN CLICK THE "NEXT" BUTTON.

#### 30 mins 15 mins

THE EMAIL ADDRESS YOU PROVIDE WILL BE YOUR USERNAME FOR THE WEBSITE!

#### **Profile Information**

Please complete the following items.

**User Detail** 

Password	•••••
Confirm Password*	
Organization Name	
Prefix	
First Name*	Farrah
Last Name*	Nuff
Middle Name	
Suffix	
Address *	1234 School St.
City *	Elyria
State *	Ohio 🗸
Zip *	44035
Phone*	(440) 555-5555
Date of Birth	MM/dd/yyyy

### CREATE YOUR PASSWORD & ENTER YOUR INFORMATION IN THE CORRESPONDING FIELDS.

RED = MANDATORY FIELD BLUE = OPTIONAL FIELD

### CLICK THE "FINISH" BUTTON WHEN YOU ARE DONE!





#### **Registration Confirmation**

Your registration information has been submitted.

Your registration confirmation number is: 20457

We have sent an email to ATTENDANCEOFFICER@SCHOOL.COM to verify your email address.

**Return to Portal** 

YOU'LL THEN RECEIVE AN EMAIL TO THE EMAIL ADDRESS YOU PROVIDED WITH A LINK TO CONFIRM YOUR EMAIL ADDRESS AND COMPLETE YOUR ACCOUNT REGISTRATION. YOU **MUST** CLICK THAT LINK IN ORDER TO COMPLETE REGISTRATION.

IF YOU DO NOT RECEIVE AN EMAIL: CHECK YOUR SCHOOL'S EMAIL SECURITY FILTERS. MANY TIMES, THE EMAIL DOESN'T COME THROUGH BECAUSE IT'S COMING FROM AN OUTSIDE EMAIL ADDRESS.

IF YOU HAVE ADDITIONAL QUESTIONS OR THE LINK TO CONFIRM YOUR EMAIL EXPIRES, PLEASE CONTACT CHIEF DEPUTY CLERK ERIKA SUGARMAN AT erika.sugarman@lcfct.org

#### ONCE YOU CLICK THAT LINK THAT WAS EMAILED TO YOU, WE WILL BE ABLE TO APPROVE YOUR ACCOUNT AND YOU'LL BE GOOD TO START FILING!



# **SECTION 2**

### LOGGING ON

AND

FORMS

### TO LOG ON:

CourtVIEW	
Home eFile	
eFile Training Video Attorney eFile Registration	LORAIN COUNTY DOMESTIC RELATIONS COURT JUVENILE DIVISION
NON ATTORNEY eFiling Registration If wish to access eFiling please click the LOG ON link in top right corner.	Important Notice about eAccess The case information contained within this web site is generated from computerized records maintained by LORAIN JUVENILE COURT and is deemed to be public information. While every effort is made to assure the data is accurate and current, it must be accepted and used by the recipient with the understanding that no warranties, expressed or implied, concerning the accuracy, reliability or suitability of this data have been made. The Court, Clerks of Court, their agents, and the developers of this web site assume no liability whatsoever associated with the use or misuse of the data contained herein.
	WE ARE STILL WORKING ON E-FILING CONFIGURATION. AS OF RIGHT NOW, ACCESS TO E-FILING IS ONLY OPEN TO SPECIFIC ENTITIES.

Click to View eFiled Cases To accept terms of the eFiling portal

### GO TO THE E-FILING WEBSITE AND CLICK THE "LOG ON" LINK IN THE TOP RIGHT CORNER

ENTER YOUR EMAIL ADDRESS THAT YOU USED TO REGISTER YOUR ACCOUNT WITH AS YOUR USER NAME & THE PASSWORD YOU CREATED

FORGOT YOUR PASSWORD? NO PROBLEM! CLICK THE "FORGOT PASSWORD" LINK AND YOU CAN RESET IT!

Username *		
attendanceofficer@so	chool.com	
Password *		
•••••		
	Login	
Forgot Password?		

# **SECTION 3**

FILING A JUVENILE COMPLAINT



#### CLICK "CREATE NEW CASE REQUEST"

#### FOR <u>CASE TYPE</u> YOU WILL SELECT <u>"UNRULY/TRUANCY"</u>

### FOR INITIATING ACTION YOU WILL SELECT <u>"2151.022(B) - HABITUAL TRUANCY"</u>

New Case Requ	ICSI.			
Filer Status	Erika Sugarman Draft	Attorney Bar No Reference Tags		
Case Type * Initiating Action *	UNRULY/TRUANCY 2151.022(B) - HABITU	JAL TRUANT	<ul><li></li><li></li><li></li></ul>	
Parties				
Party 1				

y 1						
Party Type*	In the matter of: $\checkmark$		Contact Informa	tion		
Role Type		▶ □	Address Type	DEFAULT / MAILING A	DDRE! 🗸	
Rep by Atty			Address	1234 5TH ST.		
Last Name*	SMITH					
First Name*	SUSIE					
/liddle Name	G		City	ELYRIA		
Suffix	▼		State	Ohio	~	
DOB	01/01/2013		Zip	44035		
SSN #			Phone Type	<b>`</b>		
npany Name (if not an			Phone	(###) ###-####	J	
Individual)			Email			

FOR PARTY 1:

PARTY TYPE = IN THE MATTER OF

INPUT AS MUCH INFORMATION AS YOU HAVE

THE NAME/ADDRESS AND DATE OF BIRTH YOU ENTER IN THESE FIELDS MUST EXACTLY MATCH WHAT IS ON YOUR COMPLAINT

#### FOR PARTY 2:

#### PARTY TYPE = ATTENDANCE OFFICER

### ENTER YOUR NAME AND CONTACT INFORMATION

Party Type*	Attendance Officer V		Contact Informa	tion
Role Type		~	Address Type	WORK ADDRESS
Rep by Atty			Address	1234 SCHOOL ST.
On Behalf Of				
Last Name*	NUFF			
First Name*	FARRAH			
Middle Name			City	ELYRIA
Suffix	✓ □		State	Ohio 🗸
DOB	MM/dd/yyyy		Zip	44035
SSN #			Phone Type	WORK PHONE 🗸 🗆
Company Name			Phone	(440) 444-4444
(if not an Individual)			Email	ATTENDANCEOFFICER@SC
			Add Contact Inform	nation

Kole type		~	Address Type	WORK ADDRESS V
Rep by Atty			Address	1234 SCHOOL ST.
On Behalf Of				
Last Name*	NUFF			
First Name*	FARRAH			
Middle Name			City	ELYRIA
Suffix	✓		State	Ohio 🗸 🗌
DOB	MM/dd/yyyy		Zip	44035
SSN #			Phone Type	WORK PHONE V
Company Name			Phone	(440) 444-4444
(if not an Individual)			Email	ATTENDANCEOFFICER@SC
				Delete
			Add Contact Inform	nation
Affiliation/Alia				
Amiliation/Alla	15			
Add Affiliation/A	lias			
Reviewer Commer	nts			
Add Party				
$\widehat{1}$				

SCROLL BELOW PARTY 2'S INFORMATION AND CLICK THE ADD PARTY BUTTON

### FOR PARTY 3:

PARTY TYPE = REFERRED BY

ENTER THE NAME OF THE SCHOOL IN THE COMPANY NAME BAR

THEN CLICK THE "ADD PARTY" BUTTON

Party Type*	REFERRED BY	, 🗆	Contact Informa	tion		
Role Type		< □	Address Type	SCHOOL	~	
Rep by Atty			Address	1234 SCHOOL ST		
On Behalf Of				1251 561002 51.		
Last Name						
First Name						
Middle Name			City	ELYRIA		
Suffix			State	Ohio	~	
DOR			Zip	44025		
DOB	MM/dd/yyyy		Phone Tune	1000	_	
SSN #			Phone type	v U		
ompany Name	NAME OF SCHOOL		Phone	(###) ###-####		
(if not an Individual)*			Email			
						Delete
			Add Contact Inform	nation		
filiation/Alia	IS					
dd Affiliation/A	lias					
iewer Commer	nts					



PARTY TYPE 4:

THE CHILD'S MOTHER AND/OR FATHER AND/OR LEGAL GUARDIAN WHO IS LISTED ON THE COMPLAINT

INPUT AS MUCH INFORMATION AS YOU HAVE

FEEL FREE TO ADD ANOTHER PARTY IF NEEDED!

Party Type*	NATURAL MOTHER V		Contact Informa	tion		
Role Type		~	Address Type	DEFAULT / MAILING ADDR	E! ~	
Rep by Atty On Behalf Of Last Name* First Name* Middle Name	SMITH KAREN		Address City State	1234 5TH ST. ELYRIA		
DOB SSN # Company Name (if not an Individual)	MM/dd/yyyy		Zip Phone Type Phone Email	44035 CELLULAR PHONE V (440) 777-7777 KSMITH@YAHOO.COM		Delete
Affiliation/Alia Add Affiliation/A Reviewer Commen	lias Its					

CourtVIE	(JD/JV/JU) COMPLAINT FILED BY PROS OFFICE			î li
Erika Sugarman Home	**WAIVER OF SUMMONS FILED.			
Affiliation/Alias	*PROPOSED ORDER			
Add Affiliation/Alias				
Reviewer Comments	ATTENDANCE RECORDS ATTY APPOINTMENT ENTRY			
	BRIEF			
	COMPLAINT FOR JUVENILE HABITUAL TRUANCY			
Add Party	COURT REPORTER CERTIFICATION			
Documents	COURT REPORTER CERTIFICATION (\$) DISCOVERY PLEADINGS			
Document 1	GIRLS CIRCLE SUCCESSFUL COMPLETION FILED			J
Document Type *		v 🗆 🔒	Attachments	
Document Note			Upload Attachment PDF (68.4M max file size)	Browse No file selected.
Reviewer Comments	ll.			

#### ONCE ALL YOUR PARTIES ARE IN, SCROLL DOWN TO THE DOCUMENT SECTION

YOUR DOCUMENT TYPE WILL BE "COMPLAINT FOR JUVENILE HABITUAL TRUANCY"

#### CLICK "BROWSE" AND UPLOAD YOUR COMPLETE, SIGNED, AND NOTARIZED COMPLAINT

#### IT MUST BE IN PDF FORMAT!

Documents					
Document 1					
Document Type *	COMPLAINT FOR JUVENILE HABITUAL TRUANCY		~		Attachments Upload Attachment PDF (68.4M max file size) Browse No file selected.
Reviewer Comments Documents					
Document 1					
Document Type * Page Count 1 Document Note	COMPLAINT FOR JUVENILE HABITUAL TRUANCY	~		Attach File Nan JUVENI Upload PDF (68.	Imments     Page Count     Date Uploaded       ILE TRUANCY COMPLAINT.pdf     1     08/19/2024 01:45 PM     Delete       Attachment     Browse     No file selected.



ONCE YOUR PARTIES ARE ENTERED AND YOUR DOCUMENT IS UPLOADED, SCROLL TO THE BOTTOM OF THE SCREEN AND CLICK "CONTINUE WITH FILING"

### YOU'LL THEN BE SHOWN AN OVERVIEW OF WHAT YOU ARE ABOUT TO SUBMIT TO REVIEW. YOU CAN CLICK THE LINK TO THE DOCUMENT YOU UPLOADED TO ENSURE YOU UPLOADED THE RIGHT FILE.

## IF YOU NEED TO MAKE CHANGES, CLICK <u>"MODIFY"</u> AT THE BOTTOM OF THE PAGE.

#### IF EVERYTHING IS CORRECT, CLICK <u>"SUBMIT FILING"</u>



#### YOU WILL RECEIVE AN EMAIL CONFIRMING YOUR SUBMISSION

ONCE YOUR CASE IS ACCEPTED AND FILED, YOU WILL RECEIVE AN EMAIL WITH YOUR CASE NUMBER

IF YOU RECEIVE AN EMAIL THAT YOUR CASES IS REJECTED, SEE SECTION 5

# **SECTION 4**

FILING AN ADULT COMPLAINT



#### CLICK "CREATE NEW CASE REQUEST"

#### FOR <u>CASE TYPE</u> YOU WILL SELECT <u>"CONTRIBUTING/FAILURE TO</u> <u>SEND CHILD TO SCHOOL"</u>

#### FOR <u>INITIATING ACTION</u> YOU WILL SELECT <u>"3321.38(A) - FAILURE</u> <u>TO SEND CHILD TO SCHOOL"</u>

Case Type *	CONTRIBUTING/FAILURE TO SEND CHILD TO SCHOOL V
Initiating Action *	3321.38(A) - FAILURE TO SEND CHILD TO SCHOOL 🗸
Parties	

Dorthy 4			
Party 1			
Party Type*	DEFENDANT 🗸 🗆	Contact Informa	tion
Role Type	✓	Address Type	DEFAULT / MAILING ADDRE! 🗸 🗌
Rep by Atty		Address	1234 5TH ST
On Behalf Of			
Last Name*	SMITH		
First Name*	KAREN		
Middle Name		City	ELYRIA
Suffix	✓ □	State	Ohio 🗸 🗌
DOB	08/01/1978	Zip	44035
SSN#		Phone Type	CELLULAR PHONE V
Company Name		Phone	(440) 555-5555
(if not an Individual)		Email	KARENSMITH@YAHOO.COI
,			Delete
		Add Contact Inform	nation

FOR PARTY 1:

PARTY TYPE = DEFENDANT (THE ADULT YOU ARE FILING AGAINST)

#### INPUT AS MUCH INFORMATION AS YOU HAVE

THE NAME/ADDRESS AND DATE OF BIRTH YOU ENTER IN THESE FIELDS MUST EXACTLY MATCH WHAT IS ON YOUR COMPLAINT

Party 2					
Party Type*	IN REGARDS TO V		Contact Informa	tion	
Role Type		~	Address Type	DEFAULT / MAILING ADDRE! ~	
Rep by Atty On Behalf Of Last Name * First Name * Middle Name Suffix DOB SSN # Company Name (if not an Individual)	SMITH SUSIE 01/01/2013		Address City State Zip Phone Type Phone Email	1234 5TH ST.         1234 5TH ST.         I </th <th></th>	
Affiliation/Alia Add Affiliation/A Reviewer Commen	as Jias nts		Add Contact Inform	nation	

#### FOR PARTY 2:

#### PARTY TYPE = IN REGARDS TO

\*KEEP IN MIND, IF YOU ARE FILING AGAINST AN ADULT YOU MUST ALSO SUBMIT A COMPLAINT FOR THE JUVENILE AS WELL (FOLLOW THE STEPS IN SECTION 3)

SCROLL BELOW PARTY 2'S INFORMATION AND CLICK THE ADD PARTY BUTTON

### FOR PARTY 3:

PARTY TYPE = REFERRED BY

ENTER THE NAME OF THE SCHOOL IN THE COMPANY NAME BAR

THEN CLICK THE "ADD PARTY" BUTTON

Party Type*	REFERRED BY	, 🗆	Contact Informa	tion		
Role Type		~ □	Address Type	SCHOOL	~	
Rep by Atty			Address	1234 SCHOOL ST		
On Behalf Of				1251 561002 51.		
Last Name						
First Name						
Middle Name			City	ELYRIA		
Suffix			State	Ohio	~	
DOR			Zip	44025		
DOB	MM/dd/yyyy		Phone Tune	1000	_	
SSN #			Phone type	v U		
ompany Name	NAME OF SCHOOL		Phone	(###) ###-####		
(if not an Individual)*			Email			
						Delete
			Add Contact Inform	nation		
filiation/Alia	IS					
dd Affiliation/A	lias					
iewer Commer	nts					

Party Type*	Attendance Officer V		Contact Informa	tion		
Role Type		~	Address Type	WORK ADDRESS	~	
Rep by Atty On Behalf Of			Address	1111 SCHOOL ST.		
Last Name*	NUFF					
First Name*	FARRAH					
Middle Name			City	ELYRIA		
Suffix	✓		State	Ohio	~	
DOB	MM/dd/yyyy		Zip	44035		
SSN #			Phone Type	CELLULAR PHONE V		
Company Name			Phone	(440) 777-7777		
(if not an Individual)			Email	ATTENDANCEOFFICER@SC		
						Delete

#### FOR PARTY 4:

PARTY TYPE = ATTENDANCE OFFICER

ENTER YOUR NAME AND CONTACT INFORMATION

#### ONCE ALL YOUR PARTIES ARE IN, SCROLL DOWN TO THE DOCUMENT SECTION

#### YOUR <u>DOCUMENT TYPE</u> WILL BE "ADULT COMPLAINT (58.00)"

DON'T WORRY ABOUT ANY MONEY THAT'S OWED - YOU WON'T HAVE TO PAY ANYTHING!

CourtVIE	**WAIVER OF SUMMONS FILED.	angel
	*PROPOSED ORDER	
rika Sugarman Home	ADULT COMPLAINT (58.00)	FEICERO
Individual)	AFFIDAVIT	TICLING
	AMENDED COMPLAINT	
	ATTENDANCE RECORDS	
Affiliation/Alian	ATTY APPOINTMENT ENTRY (\$)	
Add Affiliation/Alias	BRIEF	
Add Anniation/Anas	CONTACT INFORMATION SHEET	
Reviewer Comments	COURT REPORTER CERTIFICATION	
	COURT REPORTER CERTIFICATION (\$)	
	DISCOVERY PLEADINGS	
	JOURNAL ENTRY FOR JUDGES & MAG	
	MOTION FILED (ALL OTHERS)	
Add Party	MOTION TO SHOW CAUSE (JE-TRUANCY)	
Documents	NOTICE (ALL OTHERS)	
	NOTICE OF APPEARANCE	
Document 1	NOTICE OF CHANGE OF ADDRESS AND/OR CORRECTION FILED BY	~
Document Type *	~	
Document Note		U

#### CLICK "BROWSE" AND UPLOAD YOUR COMPLETE, SIGNED, AND NOTARIZED COMPLAINT

#### IT MUST BE IN PDF FORMAT!

Documents								
Document 1								
Document Type * Filing Fee Due Now Document Note	ADULT COMPLAINT (58.00) \$58.00 \$.00		v (		Attachments Upload Attachn PDF (68.4M max 1	S nent ( file size)	Browse No file selec	ted.
Documents Document 1								
Document Type * Filing Fee \$ Due Now \$ Page Count 2 Document Note	ADULT COMPLAINT (58.00) 58.00 .00	v		Attach File Nan ADULT ( Upload ) PDF (68.4	nments ne COMPLAINT.pdf Attachment 4M max file size)	Page Count 2 Browse	Date Uploaded 08/19/2024 02:51 PM No file selected.	Delete



ONCE YOUR PARTIES ARE ENTERED AND YOUR DOCUMENT IS UPLOADED, SCROLL TO THE BOTTOM OF THE SCREEN AND CLICK "CONTINUE WITH FILING"

### YOU'LL THEN BE SHOWN AN OVERVIEW OF WHAT YOU ARE ABOUT TO SUBMIT TO REVIEW. YOU CAN CLICK THE LINK TO THE DOCUMENT YOU UPLOADED TO ENSURE YOU UPLOADED THE RIGHT FILE.

## IF YOU NEED TO MAKE CHANGES, CLICK <u>"MODIFY"</u> AT THE BOTTOM OF THE PAGE.

#### IF EVERYTHING IS CORRECT, CLICK <u>"SUBMIT FILING"</u>



#### YOU WILL RECEIVE AN EMAIL CONFIRMING YOUR SUBMISSION

ONCE YOUR CASE IS ACCEPTED AND FILED, YOU WILL RECEIVE AN EMAIL WITH YOUR CASE NUMBER

IF YOU RECEIVE AN EMAIL THAT YOUR CASES IS REJECTED, SEE SECTION 5

# **SECTION 5**

## REJECTED CASES

### IF YOU RECEIVE AN EMAIL THAT YOUR CASE IS REJECTED

DON'T PANIC!

#### WE WILL TELL YOU SPECIFICALLY WHAT IS WRONG AND HOW TO FIX IT!

#### LOG ONTO E-FILING AND CLICK THE BAR THAT CONTAINS YOUR REJECTED FILING

Create New Case Reque	est Create Sul	bsequen	t Filing Case	Numper											
Filter Results															
Filing Status Draft Submitted Clerk Reviewing Clerk Rejected Resubmitted Clerk Accepted Filing Accepted	Filing Type New Case Re Subsequent I	equest 🖍	Office JUVENI All Office	LE COURT	Case Type Al Case Types COMPLAINT FOR COMPLAINT FOR COMPLAINT FOR	R CUSTODY R PATERNITY R SUPPORT	<b>~</b>								
Search for Specifie	c Filings														
Filings View	Non-deleted Film	igs 🗸			Case Number			Last Modified Begin	MM/dd/yyyy						
Reviewer	Choose One		~		Case Title			Last Modified End	MM/dd/yyyy						
Filing Attorney	Choose One		~		Reference Tags			Filing Begin	MM/dd/yyyy						
Pro Se Filers	Choose One		~					Filing End	MM/dd/yyyy						
eFile ID								Rejection Begin	MM/dd/vvvv						
Document Type	Choose One			~				Rejection End	MM/dd/yyyy						
Rows per page Search	30 🗸														
Showing 1 to 30 of 54				0	0				-	Made and Par	1710 a.c.	5% D-44	0	E	<<
Document Type		e⊦ile ID	Filing Type	Case Type	Case	litle		Reviewer	Date	Modified By	Status	File Date	Cost	Event Date	Number
ADULT COMPLAINT (58.00	))	96928	New Case Request	CONTRIBUTING	G/FAILURE D TO			Erika Sugarman	08/19/2024 03:01 PM	Erika Sugarman	Clerk Rejected	08/19/2024 02:57 PM	\$.00 🔗		

				Party 2			
				Party Type*	IN REGARDS TO 🗸		Contact Info
				Role Type		✓	Address T
				Rep by Atty			Addr
Party 1				On Behalf Of			
Party Type* DEFENDANT V	Contact Information				SMITH		
Role Type 🗸 🗸	Address Type DEi	EACH ITEM	THAT NEEDS	First Name "	SUSIE		
Rep by Atty	Address 123			Middle Name			
Ch Behalf Of L			/ CURRECTION	Suffix	✓ □		3
First Name* KAREN		WILL BE HIC	HI IGHTED IN	DOB	01/01/2024 🛛 🛗 🗹		
Middle Name	City ELY			SSN #			Phone T
Suffix 🗸 🗌	State Ohi	YELLO	N WITH A	Company Name			Phy
DOB 08/01/1978	Zip 44C			(if not an Individual)*			E
SSN #	Phone Type CEL	CONNINEIN					
Company Name	Phone (44	CI	FRK				Add Contact I
(if not an Individual)*	Email KAF						
				Affiliation/All	as		
	Add Contact Informatio			Add Anniation			
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				CHECK DATE OF D	IKIN - DUESN I MAICH	LOMPLAINT	
Do	cuments						
Doc	cument 1						
	Document Type * ADULT COM	IPLAINT (58.00)	✓ □ Attachments				
	Filing Fee \$58.00		File Name	Page Count Date Uploa			
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	Document Note		Dpload Attachment	Browse No file selec	ted.		
		1		-6/			
		111.					
Rev. WROI	NG DOCUMENT ATTACHED						

### MAKE ANY NECESSARY CHANGES





#### THEN CLICK "CONTINUE WITH FILING" AND "SUBMIT FILING"

# **SECTION 6**

REQUESTING ACCESS TO YOUR CASES

#### CLICK ON THE "CASES" TAB AT THE TOP OF THE E-FILING PAGE





#### ON THE LEFT HAND SIDE OF THE SCREEN THERE IS SCROLLABLE SECTION

### SCROLL TO THE BOTTOM OF THAT PANE AND ENTER YOUR CASE NUMBER IN THE CASE NUMBER BAR

### MAKE SURE YOU ENTER THE CASE NUMBER IN THE FOLLOWING FORMAT WITH A SPACE BETWEEN THE LETTERS AND THE NUMBERS: 24 JU 55455

THEN CLICK THE "REQUEST ENHANCED ACCESS" BUTTON

#### Erika Sugarman Home eFile Orders Calendar Cases Manage

Case Number	Case Num	ber Case Type	File Date _ Party/Company	Party Type	Date of
Case Number	🛨 🐓 24 JT	JUVENILE TRAFFIC	01/05/2024	NATURAL FATHER	
	🛨 🐓 24 JT	JUVENILE TRAFFIC	01/05/2024	DEFENDANT	
Name Search	🜟 🐓 24 JT	JUVENILE TRAFFIC	01/05/2024	NATURAL MOTHER	
ast Name	🜟 🐓 24 JT	JUVENILE TRAFFIC	01/05/2024	COMPLAINANT	
	🔶 🤺 🀓 23 JD	JUVENILE DELINQUENT	03/29/2023	ATTORNEYS	
rst Name	🜟 🐓 23 JD	JUVENILE DELINQUENT	03/29/2023	REFERRED BY	
	🜟 🐓 23 JD	JUVENILE DELINQUENT	03/29/2023	IN THE MATTER OF:	
Search by Business Name	🔶 🐓 23 JD	JUVENILE DELINQUENT	03/29/2023	NATURAL MOTHER	
mpany Name	\star 🌴 23 JD	JUVENILE DELINQUENT	03/29/2023	WITNESS	
	🔶 🦩 23 JD	JUVENILE DELINQUENT	03/29/2023	GUARDIAN AD LITEM	
se Туре	🜟 🐓 23 JD	JUVENILE DELINQUENT	03/29/2023	ATTORNEYS	
	🛨 🐓 23 JD	JUVENILE DELINQUENT	03/29/2023	ATTORNEYS	
OMPLAINT FOR CUSTODY	🛨 🦩 22 JT	JUVENILE TRAFFIC	12/05/2022	NATURAL FATHER	
OMPLAINT FOR SUPPORT	🔶 🐓 22 JT	JUVENILE TRAFFIC	12/05/2022	ATTORNEYS	
ONTRIB TO DEL/UNRULY	🔶 🐓 22 JT	JUVENILE TRAFFIC	12/05/2022	AGENCY	
RIMINAL NON-SUPPORT EPEND / NEGLECT / ABUSE	\star 🐓 22 JT	JUVENILE TRAFFIC	12/05/2022	ATTORNEYS	
UVENILE DELINQUENT	🔶 🐓 22 JT	JUVENILE TRAFFIC	12/05/2022	DEFENDANT	
Pending Cases Only	🔶 🦩 🐓 22 JT	JUVENILE TRAFFIC	12/05/2022	NATURAL MOTHER	
e Date Search Range:	★ 🐓 22 JT	JUVENILE TRAFFIC	12/05/2022	COMPLAINANT	

YOU'LL RECEIVE AN EMAIL GRANTING YOU ACCESS TO THE CASE WHICH WILL THEN APPEAR IN YOUR CASES TAB

a service a service of the service o			Case Number	Case Type	File Date
ise Number		+ 4	24 JT	JUVENILE TRAFFIC	01/05/2024
		+ 4	24 JT	JUVENILE TRAFFIC	01/05/2024
ame Search		* 4	24 JT	JUVENILE TRAFFIC	01/05/2024
st Name		* 4	24 JT	JUVENILE TRAFFIC	01/05/2024
		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
rst Name		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
Or Search by Business Name		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
ompany Name		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
	2	* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
ase Type		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
		* 4	23 JD	JUVENILE DELINQUENT	03/29/2023
		* 4	22 JT	JUVENILE TRAFFIC	12/05/2022
COMPLAINT FOR SUPPORT		* 4	22 JT	JUVENILE TRAFFIC	12/05/2022
CONTRIB TO DEL/UNRULY		* 4	22 JT	JUVENILE TRAFFIC	12/05/2022
PEPEND / NEGLECT / ABUSE		* 4	22 JT	JUVENILE TRAFFIC	12/05/2022
UVENILE DELINQUENT		* 4	22 JT	JUVENILE TRAFFIC	12/05/2022
Pending Cases Only		* 4	22 JT	JUVENILE TRAFFIC	12/05/2022
		+ 4	22 JT	JUVENILE TRAFFIC	12/05/2022

YOU CAN THEN CLICK THE BAR OF THE CASE YOU ARE LOOKING FOR, AND YOU'LL BE TAKEN TO THE ONLINE DOCKET WHERE YOU CAN VIEW THE DOCUMENTS OF THE CASE, SEE **UPCOMING HEARINGS**, FTC.

4 P

YOU CAN USE THE SEARCH FIELDS IN THE LEFT-SIDE PANE TO FIND SPECIFIC CASES