

**STATE OF NORTH CAROLINA**

File No. \_\_\_\_\_

In The General Court Of Justice  
District Court Division

\_\_\_\_\_ County

Name And Address Of Plaintiff 1

Name And Address Of Plaintiff 2

**DOMESTIC**

**CIVIL ACTION COVER SHEET**

INITIAL FILING     SUBSEQUENT FILING

Rule 5(b), Rules of Practice For Superior and District Courts

**VERSUS**

Name Of Defendant 1

Summons Submitted

Yes  No

Name And Address Of Attorney Or Party, If Not Represented (complete for initial

Name Of Defendant 2

Summons Submitted

Yes  No

Attorney Bar No.

Initial Appearance in Case

Change of Address

Counsel for

All Plaintiffs     All Defendants     Only (List party(ies) represented)

Name Of Firm

Tax ID No.

Telephone No.

FAX No.

Jury Demanded In Pleading?     No     Yes

**TYPE OF PLEADING**

**CLAIMS FOR RELIEF FOR:**

(check appropriate box)

- Amended Answer/Reply (AMND-Response)
- Amended Complaint (AMND)
- Answer/Reply (ANSW-Response)
- Complaint (COMP)
- Confession Of Judgment (CNFJ)
- Counterclaim vs. (CTCL)
  - All Plaintiffs     Only (List on back)
- Crossclaim vs. (List on back) (CRSS)
- Extend Time For An Answer (MEOT-Response)
- Rule 12 Motion In Lieu Of Answer (MDLA)
- Other: (specify)

(check all that apply)

- Alimony (ALIM)
- Annulment (ANUL)
- Child Support (CSUP)
- Custody (CUST)
- Divorce (DIVR)
- Divorce From Bed And Board (DIVB)
- Domestic Violence (DOME)
- Equitable Distribution (EQUOD)
- Medical Coverage (MEDC)
- Paternity (PATR)
- Possession Of Personal Property (POPP)
- Post Separation Support (PSSU)
- Reimbursement For Public Assistance (RPPA)
- Visitation (VIST)
- Other: (specify)

Date

Signature Of Attorney/Party

**NOTE:** All papers filed in civil actions, special proceedings and estates shall include as the first page of the filing a cover sheet summarizing the critical elements of the filing in a format prescribed by the Administrative Office of the Courts. The Clerk of Superior Court shall require a party to refile any paper which does not include the required cover sheet.

No.	<input type="checkbox"/> Additional Plaintiff(s)

No.	<input type="checkbox"/> Additional Defendant(s)	Summons Submitted
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

*Plaintiff(s) Against Whom Counterclaim Asserted*

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