

Form ACR (Access to Court Records)

STATE OF INDIANA
IN THE _____ COURT, COUNTY OF _____

_____,)
Plaintiff(s),)
vs.) Case No: _____
_____,)
Defendant(s))

**Notice of Exclusion of Confidential Information from Public Access
(FILED WITH TRIAL COURT CLERK for documents filed with the clerk)
(TENDERED IN OPEN COURT for documents tendered in open court)**

Contemporaneous with the [filing/tender] of this notice, [party name] has [filed/tendered] confidential information under the Indiana Rules on Access to Court Records. [party name], provides this notice that the confidential information is to remain excluded from public access in accordance with the authority listed below:

Name or description of document

ACR grounds for exclusion

PO-0104, Confidential Form

1. ACR 5 (B) (2)
2. ACR 5 (C) (3)
3. Ind. Code 5-2-9-5.5 (c)
4. Ind. Code 5-2-9-6
5. Ind. Code 5-2-9-7
6. Ind. Code 31-37-19-2 (2)
7. Ind. Code 33-39-1-8 (i) (2)
8. Ind. Code 34-26-5-3 (a) (C)
9. Ind. Code 34-26-5-7
10. Ind. Code 34-26-6-13
11. Ind. Code 35-33-8-3.2 (f) (2)
12. Ind. Code 35-38-2-2.3 (f) (2)

[Insert Name]

CERTIFICATE OF SERVICE

I certify that on this _____ day of _____, 20____, the foregoing was served upon the following by [state method of service]:

[list names and addresses of counsel of record]

[Signature]