

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|--|--|--------|-------------|------------------|---------------|----------------------|
| 1 | Judicial Circuit | | P | P | P | P | P |
| 2 | County ID | | P | P | P | P | P |
| 3 | County Name | | R | R | R | R | R |
| 4 | Uniform Case Number (UCN)* | | O/R | O/R | O/R | O/R | O/R |
| 5 | Court Type | | R | R | R | R | R |
| 6 | Court Name Division | | R | R | R | R | R |
| 7 | Court Name Subdivision | | O | O | O | O | O |
| 8 | Defendant Last Name | | R | R | R | R | R |
| 9 | Defendant First Name | | R | R | R | R | R |
| 10 | Defendant Middle Name | | O | O | O | O | O |
| 11 | Defendant Address Details | | R | R | R | R | R |
| 12 | Defendant DOB | | R | R | R | R | R |
| 13 | Defendant Gender | | R | R | R | R | R |
| 14 | Defendant Race | | R | R | R | R | R |
| 15 | Defendant Place of Birth | | O | O | O | O | O |
| 16 | Personal Identification Number | | R | R | R | O | O |
| 17 | Social Security Number | | O | O | O | O | O |
| 18 | Defendant Driver's License Number | | O | O | R | R | O |
| 19 | Defendant Driver's License State/Country | | O | O | R | R | O |
| 20 | Driver's License Class | | O | O | R | R | O |
| 21 | Driver's License Expiration | | O | O | O | O | O |
| 22 | FDLE Reference Number | | O | O | O | O | O |
| 23 | Charge Description | | R | R | R | R | R |
| 24 | Charge Status | | R | R | R | R | R |
| 25 | Number of Counts | | R | R | R | R | R |
| 25a | Count Number (if more than one) | | R | R | R | R | R |
| 26 | Level of the Charge | | R | R | R | R | R |
| 27 | Degree of the Charge | | R | R | R | R | R |
| 28 | Bond Status Information | | R | R | R | | |
| 29 | Offense Character | | R | R | R | R | R |
| 30 | Date of Offense | | R | R | R | R | R |
| 31 | Date of Initial Arrest | | R | R | R | R | R |
| 32 | Arresting / Issuing Agency | | R | R | R | R | R |
| 32a | Originating Agency Identifier (ORI) | | R | R | R | R | R |
| 33 | Arresting / Issuing Officer | | R | R | R | R | R |
| 34 | OBTS Number (If Booked) | | R | R | R | | R |

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|----|-----------------------------|--|--------|-------------|------------------|---------------|----------------------|
| 35 | Agency Report Number | | R | R | R | R | R |
| 36 | Party ID | | R | R | R | R | R |
| 37 | Bar Number | | R | R | R | R | R |
| 38 | Law Firm/Agency | | O | O | O | O | O |
| 39 | E-mail Address | | R | R | R | R | R |
| 40 | Alternate E-mail Address | | O | O | O | O | O |
| 41 | Payment Information | | R | R | R | R | R |
| 42 | Cost associated with filing | | P | P | P | P | P |
| 43 | Fee Type | | P | P | P | P | P |
| 44 | Filing Type | | R | R | R | R | R |
| 45 | Trace Number | | P | P | P | P | P |
| 46 | Citation Number | | | | R | R | |
| 47 | Check Digit | | | | R | R | |
| 48 | Traffic Infringement | | | | R | R | |
| 49 | Vehicle Year | | | | R | R | |
| 50 | Vehicle Color | | | | R | R | |
| 51 | Vehicle Make | | | | R | R | |
| 52 | Vehicle Model | | | | R | R | |
| 53 | Vehicle Style | | | | R | R | |
| 54 | Vehicle Tag Number | | | | R | R | |
| 55 | Year Tag Expire | | | | R | R | |
| 56 | Vehicle Tag State/Country | | | | R | R | |

*UCN is optional for initial filings ONLY. UCN is required information for subsequent filings.

| | |
|------------|---------------------------|
| P = | Portal |
| R = | Required; if known |
| O = | Optional |
| | Not applicable |

Elements 49-56 are required if a vehicle is involved in the offense. May be left blank for pedestrian or bicycle offenses.

| # | Data Element Name | Definition |
|----|--------------------------------|---|
| 1 | Judicial Circuit | Judicial Circuit as indicated on the pleading case style (caption) |
| 2 | County ID | Two character county code as identified in statute |
| 3 | County Name | Name of county case is being filed in |
| 4 | Uniform Case Number (UCN) | Text field The local case number translated into the statewide UCN format required for public display and state reporting. |
| 5 | Court Type | Trial or Appellate |
| 6 | Court Name Division | Indicates the divisions of the court as reported in case style or caption (i.e., Probate, Circuit Civil, County Civil, Family, Juvenile Dependency, Circuit Criminal, County Criminal, Criminal Traffic, Civil Traffic, Juvenile Delinquency.) |
| 7 | Court Name Subdivision | This field subdivides the "court name division" into more targeted groupings of court divisions to provide for efficient routing in those jurisdictions that use them. These may vary by jurisdiction (e.g., Child Support, Family, Juvenile Delinquency, Juvenile Dependency, Domestic Relations, Domestic Violence, Drug Court, Unified Family Court) |
| 8 | Defendant Last Name | Text field Last name of person charged. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. |
| 9 | Defendant First Name | Text field First name of person charged. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. |
| 10 | Defendant Middle Name | Text field; include "unknown" as option. Middle name of person charged. If an attorney is filing the document, this should be the middle name of the person on whose behalf the attorney is filing the document. |
| 11 | Defendant Address Details | Text field Includes Address 1, Address 2, City, State, Zip+4, telephone number, email, fax |
| 12 | Defendant DOB | Text field mm/dd/yyyy format; allow for "unknown" option |
| 13 | Defendant Gender | Selected from a drop down list Male/Female |
| 14 | Defendant Race | Use FDLE categories |
| 15 | Defendant Place of Birth | Text field Country of origin. Based on NCIC codes. Allow for "unknown" option. |
| 16 | Personal Identification Number | The criminal ID number for each defendant with a criminal case (provided by the clerk). Text Field; allow for "unknown" as option. |
| 17 | Social Security Number | Text field xxx-xx-xxxx format; allow for "unknown" option |

| # | Data Element Name | Definition |
|-----|--|---|
| 18 | Defendant Driver's License Number | Text field If FL driver's license, then it must be 13 characters. Allow for "no DL" option. If "no DL" then 19-21 are not applicable. |
| 19 | Defendant Driver's License State/Country | Drop Down |
| 20 | Driver's License Class | Drop Down A, B, C, D, E |
| 21 | Driver's License Expiration | Text field mm/dd/yyyy format |
| 22 | FDLE Reference Number | Brief synopsis of the charge; will correspond with assigned statute. Unique to an individual. FDLE reference number OR Text field |
| 23 | Charge Description | Brief synopsis of the charge; will correspond with assigned statute. FDLE reference number OR Text field |
| 24 | Charge Status | Drop Down. Use OBTS dictionary for listing. |
| 25 | Number of Counts | Text field; should associate with above described charge(s). |
| 25a | Count Number (if more than one) | Drop Down. Provides detail on each count. Should correspond with number of counts. |
| 26 | Level of the Charge | Identifies the seriousness of the offense FDLE reference number OR Selected from a drop down list Felony; Misdemeanor; Infractions; County; Municipal |
| 27 | Degree of the Charge | Identifies the degree of the violation FDLE reference number OR Selected from a drop down list Capital; Life; First Degree, punishable by life; First Degree; Second Degree; Third Degree; N/A |
| 28 | Bond Status Information | Text field. Will indicate the amount of bond set, if any, or when the bond will be set. |
| 29 | Offense Character | Clarifies the charge(s) Check box. More than one may apply. use OBTS dictionary |
| 30 | Date of Offense | Text field mm/dd/yyyy format The date the offense occurred |
| 31 | Date of Initial Arrest | Text field mm/dd/yyyy format If the defendant was not arrested/finger-printed, the date the Notice to Appear/Summons was served should be recorded here |
| 32 | Arresting / Issuing Agency | Text field completed if filing is initiated by law enforcement |
| 32a | Originating Agency Identifier (ORI) | Drop down. Use OBTS dictionary for listing. Should correspond with Agency name. |
| 33 | Arresting / Issuing Officer | completed if filing is initiated by law enforcement. Correspond with TCATS. Rank, First Name, Last Name. |
| 34 | OBTS Number (If Booked) | Text field; applies to the charge, not the individual. |

| # | Data Element Name | Definition |
|----|-----------------------------|--|
| 35 | Agency Report Number | Text field |
| 36 | Party ID | Will indicate on whose behalf the filing is made (Plaintiff or Defendant) |
| 37 | Bar Number | Text field Completed if filing made by an attorney. May be blank if filer is not an attorney |
| 38 | Law Firm/Agency | Text field If a private attorney, the name of the law firm. If a state employed attorney, the name of the agency (blank if attorney not involved in specific filing) |
| 39 | Email Address | Text field. Email contact for filer. |
| 40 | Alternate Email Address | Text field. Alternate email contact for filer. |
| 41 | Payment Information | Text field Credit Card info to include Account Number, Expiration, Type of Card, ACH transactions, and waiver of fee. |
| 42 | Cost associated with filing | Numerical value. Sometimes based on the number of individuals included in the filing. Some costs are associated with county ordinance. |
| 43 | Fee Type | Type of fee: Filing Fee |
| 44 | Filing Type | Selected from a drop down list of pleading types (e.g., Motion, Conflict Motion, Order, Petition, Pleading, etc.) |
| 45 | Trace Number | Individual identification number for the e filing |
| 46 | Citation Number | Text field |
| 47 | Check Digit | Drop down Values 1-9, and X Blank = a check digit was not exhibited on the citation |
| 48 | Traffic Infringement | Selected from a drop down list (e.g., Driving while license suspended, Seat belt violation, Speeding 6-9, Speeding 10-14, Speeding 15-19, Speeding 20-29, Speeding 30+, Child Restraint, etc.) |
| 49 | Vehicle Year | Drop Down. Will correspond with the TCATS listing. |
| 50 | Vehicle Color | Drop Down. Will correspond with the TCATS listing. |
| 51 | Vehicle Make | Free Text |
| 52 | Vehicle Model | Free Text |
| 53 | Vehicle Style | Drop Down. Conditional field; must be completed if vehicle is involved in offense. May be left blank for pedestrian or bicycle offenses. Will correspond with TCATS listing. |
| 54 | Vehicle Tag Number | Text field |
| 55 | Year Tag Expire | Drop Down |
| 56 | Vehicle Tag State/Country | Drop Down |

State Attorney

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|--|--|--------|-------------|------------------|---------------|----------------------|
| 1 | Judicial Circuit | | P | P | P | P | P |
| 2 | County ID | | P | P | P | P | P |
| 3 | County Name | | R | R | R | R | R |
| 4 | Uniform Case Number (UCN) | | O | O | O | O | O |
| 5 | Court Type | | R | R | R | R | R |
| 6 | Court Name Division | | R | R | R | R | R |
| 7 | Court Name Subdivision | | O | O | O | O | O |
| 8 | Defendant Last Name | | R | R | R | R | R |
| 9 | Defendant First Name | | R | R | R | R | R |
| 10 | Defendant Middle Name | | O | O | O | O | O |
| 11 | Defendant Address Details | | R | R | R | R | R |
| 12 | Defendant DOB | | R | R | R | R | R |
| 13 | Defendant Gender | | R | R | R | R | R |
| 14 | Defendant Race | | R | R | R | R | R |
| 15 | Defendant Place of Birth | | O | O | O | O | O |
| 16 | Personal Identification Number | | R | R | R | O | O |
| 17 | Social Security Number | | O | O | O | O | O |
| 18 | Defendant Driver's License Number | | O | O | R | R | O |
| 19 | Defendant Driver's License State/Country | | O | O | R | R | O |
| 20 | Driver's License Class | | O | O | R | R | O |
| 21 | Driver's License Expiration | | O | O | O | O | O |
| 22 | FDLE Refernce Number | | O | O | O | O | O |
| 23 | Charge Description | | R | R | R | R | R |
| 24 | Charge Status | | R | R | R | R | R |
| 25 | Number of Counts | | R | R | R | R | R |
| 25a | Count Number (if more than one) | | R | R | R | R | R |
| 26 | Level of the Charge | | R | R | R | R | R |
| 27 | Degree of the Charge | | R | R | R | R | R |
| 28 | Bond Status Information | | R | R | R | | |

State Attorney

| # | Data Element Name | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|--|--------|-------------|------------------|---------------|----------------------|
| 29 | Offense Character* (FDLE to confirm requirement) | O | O | O | O | O |
| 30 | Date of Offense | R | R | R | R | R |
| 31 | Date of Initial Arrest | | | | | |
| 32 | Arresting / Issuing Agency | | | | | |
| 32a | Originating Agency Identifier (ORI) | | | | | |
| 33 | Arresting / Issuing Officer | | | | | |
| 34 | OBTS Number (If Booked) | | | | | |
| 35 | Agency Report Number | | | | | |
| 36 | Party ID | R | R | R | R | R |
| 37 | Bar Number | R | R | R | R | R |
| 38 | Law Firm/Agency | R | R | R | R | R |
| 39 | Email Address | R | R | R | R | R |
| 40 | Alternate Email Address | O | O | O | O | O |
| 41 | Payment Information | | | | | |
| 42 | Cost associated with filing | | | | | |
| 43 | Fee Type | | | | | |
| 44 | Filing Type | R | R | R | R | R |
| 45 | Trace Number | P | P | P | P | P |
| 46 | Citation Number | | | R | R | |
| 47 | Check Digit | | | R | R | |
| 48 | Traffic Infringement | | | R | R | |
| 49 | Vehicle Year | | | R | R | |
| 50 | Vehicle Color | | | R | R | |
| 51 | Vehicle Make | | | R | R | |
| 52 | Vehicle Model | | | R | R | |
| 53 | Vehicle Style | | | R | R | |
| 54 | Vehicle Tag Number | | | R | R | |
| 55 | Year Tag Expire | | | R | R | |
| 56 | Vehicle Tag State/Country | | | R | R | |

| | |
|----------|---------------------------|
| P | Portal |
| R | Required; if known |
| O | Optional |
| | Not applicable |

Law Enforcement Officer

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|--|--|--------|-------------|------------------|---------------|----------------------|
| 1 | Judicial Circuit | | P | P | P | P | P |
| 2 | County ID | | P | P | P | P | P |
| 3 | County Name | | R | R | R | R | R |
| 4 | Uniform Case Number (UCN) | | O | O | O | O | O |
| 5 | Court Type | | R | R | R | R | R |
| 6 | Court Name Division | | R | R | R | R | R |
| 7 | Court Name Subdivision | | O | O | O | O | O |
| 8 | Defendant Last Name | | R | R | R | R | R |
| 9 | Defendant First Name | | R | R | R | R | R |
| 10 | Defendant Middle Name | | O | O | O | O | O |
| 11 | Defendant Address Details | | R | R | R | R | R |
| 12 | Defendant DOB | | R | R | R | R | R |
| 13 | Defendant Gender | | R | R | R | R | R |
| 14 | Defendant Race | | R | R | R | R | R |
| 15 | Defendant Place of Birth | | O | O | O | O | O |
| 16 | Personal Identification Number | | R | R | R | O | O |
| 17 | Social Security Number | | O | O | O | O | O |
| 18 | Defendant Driver's License Number | | O | O | R | R | O |
| 19 | Defendant Driver's License State/Country | | O | O | R | R | O |
| 20 | Driver's License Class | | O | O | R | R | O |
| 21 | Driver's License Expiration | | O | O | O | O | O |
| 22 | FDLE Reference Number | | O | O | O | O | O |
| 23 | Charge Description | | R | R | R | R | R |
| 24 | Charge Status | | R | R | R | R | R |
| 25 | Number of Counts | | R | R | R | R | R |
| 25a | Count Number (if more than 1) | | R | R | R | R | R |
| 26 | Level of the Charge | | R | R | R | R | R |
| 27 | Degree of the Charge | | R | R | R | R | R |
| 28 | Bond Status Information | | R | R | R | | |

Law Enforcement Officer

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|-------------------------------------|--|--------|-------------|------------------|---------------|----------------------|
| 29 | Offense Character* (FDLE) | | R | R | R | R | R |
| 30 | Date of Offense | | R | R | R | R | R |
| 31 | Date of Initial Arrest | | R | R | R | R | R |
| 32 | Arresting / Issuing Agency | | R | R | R | R | R |
| 32a | Originating Agency Identifier (ORI) | | R | R | R | R | R |
| 33 | Arresting / Issuing Officer | | R | R | R | R | R |
| 34 | OBTS Number (If Booked) | | R | R | R | | R |
| 35 | Agency Report Number | | R | R | R | R | R |
| 36 | Party ID | | | | | | |
| 37 | Bar Number | | | | | | |
| 38 | Law Firm/Agency | | | | | | |
| 39 | Email Address | | R | R | R | R | R |
| 40 | Alternate Email Address | | O | O | O | O | O |
| 41 | Payment Information | | | | | | |
| 42 | Cost associated with filing | | | | | | |
| 43 | Fee Type | | | | | | |
| 44 | Filing Type | | R | R | R | R | R |
| 45 | Trace Number | | P | P | P | P | P |
| 46 | Citation Number | | | | R | R | |
| 47 | Check Digit | | | | R | R | |
| 48 | Traffic Infringement | | | | R | R | |
| 49 | Vehicle Year | | | | R | R | |
| 50 | Vehicle Color | | | | R | R | |
| 51 | Vehicle Make | | | | R | R | |
| 52 | Vehicle Model | | | | R | R | |
| 53 | Vehicle Style | | | | R | R | |
| 54 | Vehicle Tag Number | | | | R | R | |
| 55 | Year Tag Expire | | | | R | R | |
| 56 | Vehicle Tag State/Country | | | | R | R | |


| | |
|------------|---------------------------|
| P = | Portal |
| R = | Required; if known |
| O = | Optional |
| ⋯ | Not applicable |

Public Defender - SUBSEQUENT FILINGS

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|--|--|--------|-------------|------------------|---------------|----------------------|
| 1 | Judicial Circuit | | P | P | P | P | P |
| 2 | County ID | | P | P | P | P | P |
| 3 | County Name | | | | | | |
| 4 | Uniform Case Number (UCN) | | R | R | R | R | R |
| 5 | Court Type | | | | | | |
| 6 | Court Name Division | | | | | | |
| 7 | Court Name Subdivision | | | | | | |
| 8 | Defendant Last Name | | | | | | |
| 9 | Defendant First Name | | | | | | |
| 10 | Defendant Middle Name | | | | | | |
| 11 | Defendant Address Details | | | | | | |
| 12 | Defendant DOB | | | | | | |
| 13 | Defendant Gender | | | | | | |
| 14 | Defendant Race | | | | | | |
| 15 | Defendant Place of Birth | | | | | | |
| 16 | Personal Identification Number | | R | R | R | | |
| 17 | Social Security Number | | | | | | |
| 18 | Defendant Driver's License Number | | | | | | |
| 19 | Defendant Driver's License State/Country | | | | | | |
| 20 | Driver's License Class | | | | | | |
| 21 | Driver's License Expiration | | | | | | |
| 22 | FDLE Reference Number | | | | | | |
| 23 | Charge Description | | | | | | |
| 24 | Charge Status | | | | | | |
| 25 | Number of Counts | | | | | | |
| 25a | Count Number (if more than one) | | | | | | |
| 26 | Level of the Charge | | | | | | |
| 27 | Degree of the Charge | | | | | | |
| 28 | Bond Status Information | | | | | | |

Public Defender - SUBSEQUENT FILINGS

| # | Data Element Name | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|-------------------------------------|--------|-------------|------------------|---------------|----------------------|
| 29 | Offense Character | | | | | |
| 30 | Date of Offense | | | | | |
| 31 | Date of Initial Arrest | | | | | |
| 32 | Arresting / Issuing Agency | | | | | |
| 32a | Originating Agency Identifier (ORI) | | | | | |
| 33 | Arresting / Issuing Officer | | | | | |
| 34 | OBTS Number (If Booked) | | | | | |
| 35 | Agency Report Number | | | | | |
| 36 | Party ID | | | | | |
| 37 | Bar Number | R | R | R | R | R |
| 38 | Law Firm/Agency | O | O | O | O | O |
| 39 | Email Address | R | R | R | R | R |
| 40 | Alternate Email Address | O | O | O | O | O |
| 41 | Payment Information | | | | | |
| 42 | Cost associated with filing | | | | | |
| 43 | Fee Type | | | | | |
| 44 | Filing Type | R | R | R | R | R |
| 45 | Trace Number | P | P | P | P | P |
| 46 | Citation Number | | | | | |
| 47 | Check Digit | | | | | |
| 48 | Traffic Infringement | | | | | |
| 49 | Vehicle Year | | | | | |
| 50 | Vehicle Color | | | | | |
| 51 | Vehicle Make | | | | | |
| 52 | Vehicle Model | | | | | |
| 53 | Vehicle Style | | | | | |
| 54 | Vehicle Tag Number | | | | | |
| 55 | Year Tag Expire | | | | | |
| 56 | Vehicle Tag State/Country | | | | | |

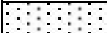
| | |
|---|---------------------------|
| P = | Portal |
| R = | Required; if known |
| O = | Optional |
|  | Not applicable |

Private Attorney - SUBSEQUENT FILINGS

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|--|--|--------|-------------|------------------|---------------|----------------------|
| 1 | Judicial Circuit | | P | P | P | P | P |
| 2 | County ID | | P | P | P | P | P |
| 3 | County Name | | | | | | |
| 4 | Uniform Case Number (UCN) | | R | R | R | R | R |
| 5 | Court Type | | | | | | |
| 6 | Court Name Division | | | | | | |
| 7 | Court Name Subdivision | | | | | | |
| 8 | Defendant Last Name | | | | | | |
| 9 | Defendant First Name | | | | | | |
| 10 | Defendant Middle Name | | | | | | |
| 11 | Defendant Address Details | | | | | | |
| 12 | Defendant DOB | | | | | | |
| 13 | Defendant Gender | | | | | | |
| 14 | Defendant Race | | | | | | |
| 15 | Defendant Place of Birth | | | | | | |
| 16 | Personal Identification Number | | R | R | R | | |
| 17 | Social Security Number | | | | | | |
| 18 | Defendant Driver's License Number | | | | | | |
| 19 | Defendant Driver's License State/Country | | | | | | |
| 20 | Driver's License Class | | | | | | |
| 21 | Driver's License Expiration | | | | | | |
| 22 | FDLE Reference Number | | | | | | |
| 23 | Charge Description | | | | | | |
| 24 | Charge Status | | | | | | |
| 25 | Number of Counts | | | | | | |
| 25a | Count Number (if more than one) | | | | | | |
| 26 | Level of the Charge | | | | | | |
| 27 | Degree of the Charge | | | | | | |
| 28 | Bond Status Information | | | | | | |

Private Attorney - SUBSEQUENT FILINGS

| # | Data Element Name | | Felony | Misdemeanor | Criminal Traffic | Civil Traffic | Juvenile Delinquency |
|-----|-------------------------------------|--|--------|-------------|------------------|---------------|----------------------|
| 29 | Offense Character | | | | | | |
| 30 | Date of Offense | | | | | | |
| 31 | Date of Initial Arrest | | | | | | |
| 32 | Arresting / Issuing Agency | | | | | | |
| 32a | Originating Agency Identifier (ORI) | | | | | | |
| 33 | Arresting / Issuing Officer | | | | | | |
| 34 | OBTS Number (If Booked) | | | | | | |
| 35 | Agency Report Number | | | | | | |
| 36 | Party ID | | R | R | R | R | R |
| 37 | Bar Number | | R | R | R | R | R |
| 38 | Law Firm/Agency | | O | O | O | O | O |
| 39 | Email Address | | R | R | R | R | R |
| 40 | Alternate Email Address | | O | O | O | O | O |
| 41 | Payment Information | | O | O | O | O | O |
| 42 | Cost associated with filing | | P | P | P | P | P |
| 43 | Fee Type | | P | P | P | P | P |
| 44 | Filing Type | | R | R | R | R | R |
| 45 | Trace Number | | P | P | P | P | P |
| 46 | Citation Number | | | | | | |
| 47 | Check Digit | | | | | | |
| 48 | Traffic Infringement | | | | | | |
| 49 | Vehicle Year | | | | | | |
| 50 | Vehicle Color | | | | | | |
| 51 | Vehicle Make | | | | | | |
| 52 | Vehicle Model | | | | | | |
| 53 | Vehicle Style | | | | | | |
| 54 | Vehicle Tag Number | | | | | | |
| 55 | Year Tag Expire | | | | | | |
| 56 | Vehicle Tag State/Country | | | | | | |

| | |
|---|---------------------------|
| P = | Portal |
| R = | Required; if known |
| O = | Optional |
|  | Not applicable |

Circuit/County Civil Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|---------------------------|---|--|--------------------------|
| Judicial Circuit | Judicial circuit as indicated on the pleading case style (caption) | Portal | |
| Plaintiff Last Name | Text field Last name of person initiating the filing. If an attorney is filing the document, this should be the last name of the person on whose behalf the attorney is filing the document. | Required, if applicable (plaintiff/defendant name or organization must be entered) | |
| Plaintiff First Name | Text field First name of person initiating the filing. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. | Required, if applicable (plaintiff/defendant name or organization must be entered) | |
| Plaintiff Middle Initial | Text field Middle initial of person initiating the filing. If an attorney is filing the document, this should be the middle initial of the person on whose behalf the attorney is filing the document. | Optional | |
| Plaintiff Address Details | Text field Includes Address 1, Address 2, City, State, Zip+4, telephone number, email, fax | Optional | |
| Plaintiff DOB | Text field mm/dd/yyyy format | Optional | |
| Plaintiff Gender | Selected from a drop down list. Male/Female | Optional | |
| Plaintiff Race | Use FDLE categories | Optional | |
| Organization Name | Text field Name of organization that is a party to the case. | Required, if applicable (plaintiff/defendant name or organization must be entered) | |

Circuit/County Civil Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|--------------------------|---|--|-------------------|
| Defendant Last Name | Text field Last name of person suit is filed against. If an attorney is filing the document, this should be the last name of the person on whose behalf the attorney is filing the document. | Required, if applicable (plaintiff/defendant name or organization must be entered) | |
| Defendant First Name | Text field First name of person suit is filed against. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. | Required, if applicable (plaintiff/defendant name or organization must be entered) | |
| Defendant Middle Initial | Text field Middle initial of person suit is filed against. If an attorney is filing the document, this should be the middle initial of the person on whose behalf the attorney is filing the document. | Optional | |
| Defendant DOB | Text field mm/dd/yyyy format | Optional | |
| Defendant Gender | Selected from a drop down list. Male/Female | Optional | |
| Defendant Race | Use FDLE categories | Optional | |
| Party ID | Will indicate on whose behalf the filing is made (Primary Party or On Behalf Of) | Optional | |
| Bar Number | Text field Completed if filing made by an attorney. May be blank if filer is not an attorney | Required | |
| Law Firm/Agency | Text field If a private attorney, the name of the law firm. If a state employed attorney, the name of the agency (blank if attorney not involved in specific filing) | Optional | |
| Payment Information | Text field Credit Card info to include Account Number, Expiration, Type of Card, ACH transactions, and waiver of fee | Optional | |

Circuit/County Civil Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|-----------------------------|--|-----------------------|--------------------------|
| Cost associated with filing | Numerical value. Sometimes based on the number of individuals included in the filing. Some costs are associated with county ordinance. | Portal | |
| Fee Type | Type of Fee: Filing Fee | Portal | Optional |
| Filing Type | Selected from a drop down list of pleading types (e.g., Motion, Order, Petition, Pleading, etc.) | Required | |
| Trace Number | Individual identification number for the e-filing | Portal | |
| County Name | Name of county case is being filed in | Required | |
| County ID | Two character county code as identified in statute | Portal | |
| Court Type | Trial or Appellate | Required | |
| Court Name Division | Indicates the divisions of the Court as reported in case style or caption (i.e., Family, Civil Traffic, Circuit Civil, County Civil, Circuit Criminal, County Criminal, Probate) | Required | |
| Court Name Subdivision | Optional: This field subdivides the "Court Name Division" field into more targeted groupings of court divisions to provide for efficient routing in those jurisdictions that use them. These may be different in different jurisdictions (e.g., Child Support, Family, Juvenile Delinquency, Juvenile Dependency, Domestic Relations, Domestic Violence, Juvenile Drug Court (child), Dependency Drug Court (parents), Unified Family Court) | Optional | |
| Uniform Case Number (UCN) | Text field The local case number translated into the statewide UCN format required for public display and state reporting. Year and Sequence number will generate the UCN for the filer. | | Required |

Circuit/County Civil Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|--|--|--|-------------------|
| <p>Proceeding Type of Case (Form 1.997)</p> | <p>Selected from a drop down list. Condominium Contracts and indebtedness Eminent domain Auto negligence Negligence - other (if selected additional drop down to include) -Business governance; Business torts; Environmental/Toxic tort; Third party indemnification; Construction defect; Mass tort; Negligent security, Nursing home negligence; Premises liability - commercial; Premises liability - residential Products liability Real property/Mortgage foreclosure (if selected additional drop down to include) -Commercial foreclosure \$0 - \$50,000; Commercial foreclosure \$50,001 - \$249,999; Commercial foreclosure \$250,000 or more; Homestead residential foreclosure \$0 - \$50,000; Homestead residential foreclosure \$50,001 - \$249,999; Homestead residential foreclosure \$250,000 or more; Non-homestead residential foreclosure \$0 - \$50,000; Non-homestead residential foreclosure \$50,001 - \$249,999; Non-homestead residential foreclosure \$250,000 or more; Other real property actions \$0 - \$50,000; Other real property actions \$50,001 - \$249,999; Other real property actions \$250,000 or more Professional malpractice (if selected additional drop down to include) -Malpractice - business; Malpractice - medical; Malpractice - other professional Other (if selected additional drop down to include) -Antitrust/Trade regulation; Business transactions; Constitutional challenge - statute or ordinance; Constitutional challenge - proposed amendment; Corporate trusts; Discrimination - employment or other; Insurance claims; Intellectual property;</p> | <p>Required (will generate coversheet)</p> | |
| <p>Proceeding Related Cases Filed (Form 1.997)</p> | <p>Drop down No, to the best of my knowledge, no related cases exist Yes, if "yes", list all related cases by name, case number and court (if this option is selected, the Known Related Cases field must be completed)</p> | <p>Required (will generate coversheet)</p> | |

Circuit/County Civil Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|--|---|--|--------------------------|
| Known Related Cases (Form 1.997) | Text field Cases related to this filing | Required (will generate coversheet) | |
| Remedies Sought (Form 1.997) | Check box. More than one remedy can be selected. Monetary Non-monetary declaratory or injunctive relief Punitive | Required (will generate coversheet) | |
| Number of Causes of Action (Form 1.997) | Text field Reason(s) the lawsuit is initiated | Required (will generate coversheet) | |
| Class Action Lawsuit (Form 1.997) | Selected from a drop down list. Yes/No | Required (will generate coversheet) | |
| Jury Trial Demanded (Form 1.997) | Selected from a drop down list. Yes/No | Required (will generate coversheet) | |
| Case Title | Title from the case style or caption (i.e., In the Interest of, In RE: Estate of, Petitioner vs. Respondent, Plaintiff vs. Defendant, Appellant vs. Appellee) | Optional | |
| Document Submission Date/Time | The date and time the document was submitted to the portal | Portal | Portal |
| Document Completion Date/Time | The date and time the document was accepted by the clerk | Portal | Portal |
| Means of Final Disposition (Form 1.998) | Selected from a drop down list. Dismissed Before Hearing (if selected additional drop down to include) -Dismissed Pursuant to Settlement - Before Hearing; Dismissed Pursuant to Mediated Settlement - Before Hearing; Other - Before Hearing Dismissed After Hearing (if selected additional drop down to include) -Dismissed Pursuant to Settlement - After Hearing; Dismissed Pursuant to Mediated Settlement - After Hearing; Other - After Hearing Disposed by Default Disposed by Judge Disposed by Non-jury Trial Disposed by Jury Trial Other | | Required, if applicable |

| Dependency Legal XML Envelope | | | |
|-------------------------------|---|----------------|-------------------|
| Data Element Name | Description | Initial Filing | Subsequent Filing |
| Judicial Circuit | Judicial circuit as indicated on the pleading case style (caption) | Portal | |
| Petitioner Last Name | Text field Last name of person initiating the filing. If an attorney is filing the document, this should be the last name of the person on whose behalf the attorney is filing the document. | Required | |
| Petitioner First Name | Text field First name of person initiating the filing. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. | Required | |
| Petitioner Middle Initial | Text field Middle initial of person initiating the filing. If an attorney is filing the document, this should be the middle initial of the person on whose behalf the attorney is filing the document. | Optional | |
| Petitioner Address Details | Text field Includes Address 1, Address 2, City, State, Zip+4, telephone number, email, fax | Optional | |
| Petitioner DOB | Text field mm/dd/yyyy format | Optional | |
| Petitioner Gender | Selected from a drop down list. Male/Female | Optional | |
| Petitioner Race | Use FDLE categories | Optional | |
| Party ID | Will indicate on whose behalf the filing is made (e.g., child, mother, father, interested party, etc.) | Optional | |
| Bar Number | Text field Completed if filing made by an attorney. May be blank if filer is not an attorney | Required | |
| Law Firm/Agency | Text field If a private attorney, the name of the law firm. If a state employed attorney, the name of the agency (blank if attorney not involved in specific filing) | Optional | |
| Payment Information | Text field Credit Card info to include Account Number, Expiration, Type of Card, ACH transactions, and waiver of fee | Optional | |

| Dependency Legal XML Envelope | | | |
|-------------------------------|--|----------------|-------------------|
| Data Element Name | Description | Initial Filing | Subsequent Filing |
| Cost associated with filing | Numerical Value. Sometimes based on the number of individuals included in the filing. Some costs are associated with county ordinance. | Portal | |
| Fee Type | Type of Fee: Filing Fee | Portal | Optional |
| Filing Type | Selected from a drop down list of pleading types (e.g., Motion, Order, Petition, Pleading, etc.) | Required | |
| Trace Number | Individual identification number for the efile | Portal | |
| County Name | Name of county case is being filed in | Required | |
| County ID | Two character county code as identified in statute | Portal | |
| Court Type | Trial or Appellate | Required | |
| Court Name Division | Indicates the divisions of the Court as reported in case style or caption (i.e., Family, Civil Traffic, Circuit Civil, County Civil, Circuit Criminal, County Criminal, Probate) | Required | |
| Court Name Subdivision | Optional: This field subdivides the "Court Name Division" field into more targeted groupings of court divisions to provide for efficient routing in those jurisdictions that use them. These may be different in different jurisdictions (e.g., Child Support, Family, Juvenile Delinquency, Juvenile Dependency, Domestic Relations, Domestic Violence, Juvenile Drug Court (child), Dependency Drug Court (parents), Unified Family Court) | Optional | |
| Uniform Case Number (UCN) | Text field The local case number translated into the statewide UCN format required for public display and state reporting. Year and Sequence number will generate the UCN for the filer. | | Required |
| Child Last Name | Last name of child case is pertaining to | Required | |
| Child First Name | First name of child case is pertaining to | Required | |
| Child Middle Initial | Middle initial of child case is pertaining to | Optional | |
| Child DOB | mm/dd/yyyy format | Optional | |

| Dependency Legal XML Envelope | | | |
|---|--|----------------|-------------------|
| Data Element Name | Description | Initial Filing | Subsequent Filing |
| Child Gender | Selected from a drop down list. Male/Female | Optional | |
| Child Race | Use FDLE categories | Optional | |
| Case Title | Title from the case style or caption (i.e., In the Interest of, In RE: Estate of, Petitioner vs. Respondent, Plaintiff vs. Defendant, Appellant vs. Appellee) | Optional | |
| Document Submission Date/Time | The date and time the document was submitted to the portal | Portal | Portal |
| Document Completion Date/Time | The date and time the document was accepted by the clerk | Portal | Portal |
| Proceeding Type (Form 12.928) | Selected from a drop down list. Initial Action/Petition or Reopening Case If value is Reopening Case, filer must complete the "Proceeding Reopen Type" field | Required | |
| Proceeding Reopen Type (Form 12.928) | Selected from a drop down list. Modification/Supplemental Petition Motion for Civil Contempt/Enforcement Other | Required | |
| Proceeding Type of Case (Form 12.928) | Selected from a drop down list of family case types. Petition for Dependency Shelter Petition Termination of Parental Rights Arising Out of Chapter 39 Adoption Arising Out of Chapter 39 CINS/FINS | Required | |
| Proceeding Related Cases Filed (Form 12.928) | Selected from a drop down list. No, to the best of my knowledge, no related cases exist Yes, all related cases are listed on Family Law Form 12.900(h) | Required | |

Family Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|----------------------------|---|----------------|-------------------|
| Judicial Circuit | Judicial circuit as indicated on the pleading case style (caption) | Portal | |
| Petitioner Last Name | Text field Last name of person initiating the filing. If an attorney is filing the document, this should be the last name of the person on whose behalf the attorney is filing the document. | Required | |
| Petitioner First Name | Text field First name of person initiating the filing. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. | Required | |
| Petitioner Middle Initial | Text field Middle initial of person initiating the filing. If an attorney is filing the document, this should be the middle initial of the person on whose behalf the attorney is filing the document. | Optional | |
| Petitioner Address Details | Text field Includes Address 1, Address 2, City, State, Zip+4, telephone number, email, fax | Optional | |
| Petitioner DOB | Text field mm/dd/yyyy format | Optional | |
| Petitioner Gender | Selected from a drop down list. Male/Female | Optional | |
| Petitioner Race | Use FDLE categories | Optional | |
| Respondent Last Name | Text field Last name of person the suit is filed against. | Required | |
| Respondent First Name | Text field First name of person the suit is filed against. | Required | |
| Respondent Middle Initial | Text field Middle initial of person the suit is filed against. | Optional | |
| Respondent DOB | Text field mm/dd/yyyy format | Optional | |
| Respondent Gender | Selected from a drop down list. Male/Female | Optional | |
| Respondent Race | Use FDLE categories | Optional | |
| Party ID | Will indicate on whose behalf the filing is made (Primary or On Behalf Of) | Optional | |
| Bar Number | Text field Completed if filing made by an attorney. May be blank if filer is not an attorney | Required | |

Family Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|-------------------------------|--|----------------|-------------------|
| Law Firm/Agency | Text field If a private attorney, the name of the law firm. If a state employed attorney, the name of the agency (blank if attorney not involved in specific filing) | Optional | |
| Payment Information | Text field Credit Card info to include Account Number, Expiration, Type of Card, ACH transactions, and waiver of fee | Optional | |
| Cost associated with filing | Numerical Value. Sometimes based on the number of individuals included in the filing. Some costs are associated with county ordinance. | Portal | |
| Fee Type | Type of Fee: Filing Fee | Portal | Optional |
| Filing Type | Selected from a drop down list of pleading types (e.g., Motion, Order, Petition, Pleading, etc.) | Required | |
| Trace Number | Individual identification number for the e filing | Portal | |
| County Name | Name of county case is being filed in | Required | |
| County ID | Two character county code as identified in statute | Portal | |
| Court Type | Trial or Appellate | Required | |
| Court Name Division | Indicates the divisions of the Court as reported in case style or caption (i.e., Family, Civil Traffic, Circuit Civil, County Civil, Circuit Criminal, County Criminal, Probate) | Required | |
| Court Name Subdivision | Optional: This field subdivides the "Court Name Division" field into more targeted groupings of court divisions to provide for efficient routing in those jurisdictions that use them. These may be different in different jurisdictions (e.g., Child Support, Family, Juvenile Delinquency, Juvenile Dependency, Domestic Relations, Domestic Violence, Juvenile Drug Court (child), Dependency Drug Court (parents), Unified Family Court) | Optional | |
| Uniform Case Number (UCN) | Text field The local case number translated into the statewide UCN format required for public display and state reporting. Year and Sequence number will generate the UCN for the filer. | | Required |
| Proceeding Type (Form 12.928) | Selected from a drop down list. Initial Action/Petition or Reopening Case If value is Reopening Case, filer must complete the "Proceeding Reopen Type" field | Required | |

Family Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|---|--|----------------|-------------------|
| Proceeding Reopen Type (Form 12.928) | Selected from a drop down list. Modification/Supplemental Petition Motion for Civil Contempt/Enforcement Other | Required | |
| Proceeding Type of Case (Form 12.928) | Selected from a drop down list of family case types. Simplified Dissolution of Marriage Dissolution of Marriage Domestic Violence Dating Violence Sexual Violence Support IV-D (Department of Revenue, Child Support Enforcement) Support Non-IV-D (not Department of Revenue, Child Support Enforcement) UIFSA IV-D (Department of Revenue, Child Support Enforcement) UIFSA Non-IV-D (not Department of Revenue, Child Support Enforcement) Other Family Court Adoption Arising Out of Chapter 63 Name Change Paternity/Disestablishment of Paternity | Required | |
| Proceeding Related Cases Filed (Form 12.928) | Selected from a drop down list. No, to the best of my knowledge, no related cases exist Yes, all related cases are listed on Family Law Form 12.900(h) | Required | |
| Case Title | Title from the case style or caption (i.e., In the Interest of, In RE: Estate of, Petitioner vs. Respondent, Plaintiff vs. Defendant, Appellant vs. Appellee) | Optional | |
| Document Submission Date/Time | The date and time the document was submitted to the portal | Portal | Portal |
| Document Completion Date/Time | The date and time the document was accepted by the clerk | Portal | Portal |

Probate Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|--------------------------|---|-----------------------|--------------------------|
| Judicial Circuit | Judicial circuit as indicated on the pleading case style (caption) | Portal | |
| Person Last Name | Text field Last name of person initiating the filing. If an attorney is filing the document, this should be the last name of the person on whose behalf the attorney is filing the document. | Required | |
| Person First Name | Text field First name of person initiating the filing. If an attorney is filing the document, this should be the first name of the person on whose behalf the attorney is filing the document. | Required | |
| Person Middle Initial | Text field Middle initial of person initiating the filing. If an attorney is filing the document, this should be the middle initial of the person on whose behalf the attorney is filing the document. | Optional | |
| Person Address Details | Text field Includes Address 1, Address 2, City, State, Zip+4, telephone number, email, fax | Optional | |
| Person DOB | Text field mm/dd/yyyy format | Optional | |
| Person Gender | Selected from a drop down list. Male/Female | Optional | |
| Person Race | Use FDLE categories | Optional | |
| Party ID | Will indicate on whose behalf the filing is made (e.g., child, mother, father, interested party, etc.) | Optional | |
| Bar Number | Text field Completed if filing made by an attorney. May be blank if filer is not an attorney | Required | |
| Law Firm/Agency | Text field If a private attorney, the name of the law firm. If a state employed attorney, the name of the agency (blank if attorney not involved in specific filing) | Optional | |
| Payment Information | Text field Credit Card info to include Account Number, Expiration, Type of Card, ACH transactions, and waiver of fee | Optional | |

Probate Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|-----------------------------|--|-----------------------|--------------------------|
| Cost associated with filing | Numerical Value. Sometimes based on the number of individuals included in the filing. Some costs are associated with county ordinance. | Portal | |
| Fee Type | Type of Fee: Filing Fee | Portal | Optional |
| Filing Type | Selected from a drop down list of pleading types (e.g., Motion, Order, Petition, Pleading, etc.) | Required | |
| Trace Number | Individual identification number for the e filing | Portal | |
| County Name | Name of county case is being filed in | Required | |
| County ID | Two character county code as identified in statute | Portal | |
| Court Type | Trial or Appellate | Required | |
| Court Name Division | Indicates the divisions of the Court as reported in case style or caption (i.e., Family, Civil Traffic, Circuit Civil, County Civil, Circuit Criminal, County Criminal, Probate) | Required | |
| Court Name Subdivision | Optional: This field subdivides the "Court Name Division" field into more targeted groupings of court divisions to provide for efficient routing in those jurisdictions that use them. These may be different in different jurisdictions (e.g., Child Support, Family, Juvenile Delinquency, Juvenile Dependency, Domestic Relations, Domestic Violence, Juvenile Drug Court (child), Dependency Drug Court (parents), Unified Family Court) | Optional | |
| Uniform Case Number (UCN) | Text field The local case number translated into the statewide UCN format required for public display and state reporting. Year and Sequence number will generate the UCN for the filer. | | Required |
| Decedent Last Name | Last name of person estate is regarding. | Required | |
| Decedent First Name | First name of person estate is regarding. | Required | |
| Decedent Middle Initial | Middle initial of person estate is regarding. | Optional | |
| Case Title | Title from the case style or caption (i.e., In the Interest of, In RE: Estate of, Petitioner vs. Respondent, Plaintiff vs. Defendant, Appellant vs. Appellee) | Optional | |

Probate Legal XML Envelope

| Data Element Name | Description | Initial Filing | Subsequent Filing |
|-------------------------------|--|----------------|-------------------|
| Document Submission Date/Time | The date and time the document was submitted to the portal | Portal | Portal |
| Document Completion Date/Time | The date and time the document was accepted by the clerk | Portal | Portal |
| Proceeding Type of Case | Selected from a drop down list. Probate Guardianship Trusts Baker Act Substance Abuse Act Other Social | Required | |