Enter the name of the county in which this case is filed.	STAT	E OF WISCONSIN, CI			
Enter the Petitioner/ Plaintiff's full name. Enter the Respondent/	Petiti	oner/Plaintiff:			
Defendant's full name.	First name Middle name Last name				
Enter the case number.	Resp	Respondent/Defendant:			
Use this form to request redaction of protected information from a filed document. Protected information only includes social security, employer or tax ID, driver license,	First nar	ne Middle nam	ne Last name	Motion to Redact Protected Information in Court Record	
financial accounts, and passport numbers.				Case No.	
This form is used in all case types. Some information may not apply to your case. In #1, describe the type of protected information that you want to have redacted from the court record. For	 I request that the following protected information be redacted from the documents listed below:				
example, "Visa card number of Daniel Defendant."		Date	Name of Document	Page and Line Number	
Note every place in the court record where the information appears. The court is not responsible for finding protected information in other places.					
Do NOT put the actual number on this form.					
In #2, use form GF-241 to provide the protected information to the court if it is needed for this case. The court will keep the GF-241 confidential.	☐ 2.	I am filing GF-241 to provide this protected information to the court if it is needed for this proceeding.			
In #3, if you are not a party or the attorney for a party, describe your relationship to this case.	3.	. I am not an attorney or a party to this case. I am interested because:			
			_		
Sign and print your name and date the document.		Signature			
			Print	or Type Name	
DISTRIBUTION: 1. Court 2. Parties	Relatio			tionship to Case	
3. Petitioner, if not a party		Date			