

**REQUEST FOR RECORD INSPECTION AND/OR COPY
CITY OF OVERLAND PARK, KANSAS**

Requester's Information

Name _____
Agency _____
Street Address _____
City, State, Zip _____
Day Phone _____ Fax _____

Defendant Information

Name _____
(First, Middle Initial, Last, & Suffix)
Possible Aliases _____
Date of Birth _____
___ Inspecting Records ___ Copies of Records
Method of Return: ___ Mail ___ Fax ___ In Person

*** ONE DEFENDANT PER FORM PLEASE ***ALL RECORDS WILL BE CERTIFIED UNLESS REQUESTED OTHERWISE***

Case Information

Case Number, Violation Date, Charges

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Records Sought

___ Entire Record ___ Disposition * ___ Case Summary**
Other _____

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Other _____

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Other _____

*Disposition includes a copy of the complaint/ticket, Judge's bench notes, waiver of counsel, sentencing journal entry, and close-out orders.
Case Summary is a **printout of case number, charges, violation date, finding, finding date, and sentencing information.

CHARGES: A charge for providing copies of public records is authorized by state law and has been established by the City Governing Body. These charges are set at a level to compensate the City for the actual costs incurred in honoring your request. The fee schedule established by the City is posted in this office.

CERTIFICATION

I understand that K.S.A. 45-230, as amended, provides that except to the extent otherwise authorized, "No person shall knowingly sell, give or receive, for the purpose of selling or offering for sale any property or service to persons listed therein, any list of names and addresses contained in and derived from public records."

I also understand that a violation of K.S.A. 45-230, as amended, is a Class C misdemeanor.

I hereby certify that I do not intend to, and will not: (A) Use any list of names or addresses contained in or derived from the records or information for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or (B) sell, give or otherwise make available to any person any list of names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed.

***SIGNATURE _____ Your copy of this form is your receipt

Please mail or fax to: Overland Park Municipal Court, 12400 Foster St., Overland Park, KS. 66213 fax: 913-327-5760

(To Be Completed by Record Custodian)

Date and Time of Request _____ AM PM Date and Time Access Provided _____ AM PM
The charge to your for copy(s) of the record(s) you request is: \$ _____ Records Custodian _____
___ Prepaid ___ Paid ___ Billed ___ Based on posted formula ___ Based upon non-office reproduction costs