Judge or Division:	Case Number:	
Defendant's Name/Address:	Applicant's Name (Please Print):	
	Agency Applicant Represents:	
•	Agency Address:	
	Agency's Telephone Number:	
		(Date File Stamp)

Application to Inspect Public Municipal Division Records

I request the Court to authorize access to public municipal records	for case number in which			
is named as a party.				
☐ I am the defendant or the defendant's authorized representativ	e (unless representative is the attorney of record, attach	a		
copy of the authorization.)	1 40 14 0 4 610 10 70 70			
I am the victim of an offense, as defined and for the purposes	dentified in Section 610.105 RSMo.			
Access is desired for purposes of:				
prosecution				
sentencing				
parole consideration				
investigation by a federal agency as authorized by law or Presidential Order				
criminal justice employment				
child care employment				
elder care employment				
disabled care employment				
administration of criminal justice, as defined and for the purposes identified in Section 43.500 RSMo				
law enforcement agency for issuance/renewal of license, permit, certificate and registration				
state agency, as defined and for the purposes identified in Section 43.543 RSMo				
other (please explain):				
		_		
Date	Applicant's Signature			
	Bar Number (If an Attorney)			
Response:				
The above Application to Inspect Public Court Records is: granted denied. *The denial of any records in writing will only be provided upon the request of the applicant.				
Date	Judge/Clerk			