

# Village of Claycomo

115 E US HWY 69  
CLAYCOMO MO 64119  
PH (816) 452-5539, OPT 4

Email Request To: PoliceClerkPT@Claycomo.org

CITY HALL ONLY

RCVD: \_\_\_\_/\_\_\_\_/\_\_\_\_ BY \_\_\_\_

\$\_\_\_\_\_ AMOUNT CK\_\_\_\_\_

## REQUEST FOR COPIES OF PUBLIC RECORDS

THIS DOCUMENT SERVES AS YOUR REQUEST NOTICE PER MISSOURI SUNSHINE LAW.

DATE OF REQUEST: \_\_\_\_\_

PERSON REQUESTING: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### POLICE/FIRE DEPARTMENT:

\_\_\_\_ POLICE/FIRE REPORT (\$10.00)

\_\_\_\_ CERTIFIED COPY (\$15.00)

\_\_\_\_ POLICE/FIRE VIDEO (\$25.00)

NAME (S) ON REPORT: \_\_\_\_\_

DATE OF INCIDENT: \_\_\_\_\_

### VILLAGE RECORD:

\_\_\_\_ NON-CERTIFIED COPY (\$0.10 PER PAGE)

\_\_\_\_ CERTIFIED COPY (\$5.00)

RECORD REQUESTED \_\_\_\_\_

### COURT RECORD:

\_\_\_\_ NON-CERTIFIED COPY (\$0.10 PER PAGE)

\_\_\_\_ CERTIFIED COPY (\$5.00)

\_\_\_\_ ENTIRE FILE COPY (\$15.00)

ADDED INFORMATION \_\_\_\_\_

PAYMENT FOR REQUESTED DOCUMENTS REQUIRED AT THE TIME OF THE REQUEST.  
REQUESTS WILL NOT BE PROCESSED UNTIL WE RECEIVE PAYMENT IN FULL.

**PLEASE ALLOW UP TO THIRTY (30) DAYS FOR YOUR REQUEST TO BE PROCESSED. THE POLICE CLERK WILL NOTIFY YOU WHEN YOUR REQUEST IS AVAILABLE.**

OPTIONS:  PICKUP (Signature Required at Time of Pickup)

Signature Below Required to Approve Other Delivery Method

EMAIL

MAIL (SASE Required)

\_\_\_\_\_  
SIGNATURE (PERSON REQUESTING)

\_\_\_\_\_  
DATE