IN THE 18th JUDICIAL DISTRICT DISTRICT COURT OF SEDGWICK COUNTY, KANSAS

THE STATE OF KANSAS Petitioner	
VS.	Case No.
[Name]Respondent	

REQUEST FOR THE AFFIDAVIT OR SWORN TESTIMONY IN SUPPORT OF A WARRANT OR SUMMONS

Pursuant to K.S.A. 22-2302, as amended by 2014 Senate Substitute for House Bill 2389.

I respectfully request of	the Court a copy of the affidavi	t or sworn testimony in support of the warrant or	
summons issued on	[Date] regarding:		
		Name of Subject of Warrant or Summons].	
	Submitted by:		
	Name(Print) Address 1:		
	Telephone:		
	F-mail Address:		

Additional Information:

- 1. This form is intended to provide sufficient information for the Clerk of the District Court to identify the precise affidavit or sworn testimony that is being requested pursuant to t K.S.A. 22-2302(c) or K.S.A. 22-2502(e).
- 2. Upon completion and fling of this form, the Clerk will promptly notify the defendant or the defendant's counsel, the prosecutor and the judge of your request.
- 3. From this point, the defendant or the defendant's counsel and the prosecutor may, within five (5) business days, submit to the judge, under seal, proposed redactions and a motion to seal the affidavits of sworn testimony.
- 4. The judge will subsequently review any proposed redactions to or motions to seal the requested affidavits or sworn testimony, and will either redact or seal the requested affidavits or sworn testimony if merited, within five (5) business days of receiving the parties proposed redactions or motions to seal. The judge will only redact or seal the requested affidavits if doing so is necessary to prevent public disclosure of information pertaining to the statutorily-enumerated categories et out in K.S.A. 22-2302(c)(4) or K.S.A. 22-2502(e)(4).

<u>CERTIFICATE OF SERVICE</u>
[To be completed by the Clerk of the Court.]

I certify that I have served (1) Personal Service. By del	•	. •	C	
•		•	onowing persons on th	o dates marcated.
(Name)	(Date)			
(2) Mail Service. By mailing each of the following persons	on the day of _ at the following addre	sses:	, a copy of this rec	quest by first class mail to
(3) Telefacsimile communica				
of this request to the followin	g persons:			
Number of transmitting mach	ine:			
Number of receiving machine	::			
(4) <u>Internet electronic mail</u> . If the request to the following p	ersons at the following Aaron.Breitenbach@ Becky.Hurtig@sedgy carol.munsell@sedgy	e-mail addresses: sedgwick.gov vick.gov vick.gov	,, at	_ o'clockm., a copy of
lori.schmidt@sedgwick.gov dan.dillon@sedgwick.gov	justin.edwards@sedg	wick.gov		
Clerk of the		District Court		
		By: Deputy (Clerk	