FOR C	OFFICE USE ONLY:
RECEIVED BY:	DATE:

## REQUEST FOR REMOVAL OF NAME AND HOME ADDRESS/HOME OWNERSHIP FROM PUBLIC ACCESS PURSUANT TO K.S.A. 2021 Supp. 45-221 (a)(51)

NAME:	(Please Print Legibly)				
POSITION:	: JURISDICTION:				
	rom public access of records ltiple properties, I will disclose				
request, it is my respon	derstand that if my home add asibility to resubmit this requ caccess to view or pay taxes for	est in writing to the custodia	an of such public records.		
I certify that I am a:		Λ.			
Law Enforcement:	Attorney:	Courts:	Other:		
□ Law Enforcement Officer as defined by K.S.A. 2011 Supp. 21-5111, and amendments thereto □ Parole Officer □ Probation Officer □ Community Correctional Services Officer □ Local Correctional Officer or Local Detention Officer	Attorney General or Assistant Attorney General or Special Assistant Attorney General  District Attorney or Assistant District Attorney or Special Assistant District Attorney  U.S. Attorney or Assistant U.S. Attorney or Special Assistant U.S. Attorney  City Attorney or Assistant City Attorney or Special Assistant City Attorney  County Attorney  County Attorney or Assistant County Attorney or Special Assistant County Attorney	☐ Federal Judge ☐ A Municipal Judge ☐ Justice of the Supreme Court ☐ District Magistrate Judge ☐ Judge of the Court of Appeals ☐ District Court Judge ☐ Employee of a Municipal Court ☐ Employee of the Judicial Branch ☐ Court Services Officer	☐ A presiding officer who conducts hearings pursuant to Kansas Administrative Procedure Act ☐ An Administrative Law Judge employed by the Offic of Administrative Hearings ☐ An Administrative Law Judge who conducts hearings pursuant to the Workers Compensation Act ☐ A member of the Workers' Compensation Appeals Board ☐ A member of the State Board of Tax Appeal		
SIGNATURE OF REQUES	STOR DATE	FOR O	OFFICE USE ONLY ged		
HOME ADDRESS/CITY/Z	ZIP				
EMAIL ADDRESS					
PHONE NUMBER		Record	updated: Initials:		

#### Instructions

- ✓ File your application with the **Sedgwick County Clerk's Office** at **100 N. Broadway**, **Suite 620**, **Wichita, KS, 67202**, or fax to 316-660-9217 or email to sgclerk@sedgwick.gov.
- ✓ Fill out the **Request for Non-Disclosure of Residential Address** and submit it to the Election's Office **OR** have it filled out when the applicant submits the application and our office will get it to the Election's Office.
- ✓ If the applicant has concerns that one of the municipalities attached to the checklist may disclose the applicant's information, the applicant will want to contact them directly.
- ✓ The County Clerk's office will notify the applicant via email that the process has been completed.
- Once complete, it is advisable that the applicant make sure that their address is shown as confidential.
  - https://ssc.sedgwickcounty.org/propertytax/default.aspx

# Request for Nondisclosure of Residential Address



Note: This form is intended to protect law enforcement personnel, judicial officers and crime victims. You must be able to specify a clearly unwarranted invasion of personal privacy or a threat to your safety in order for you residential address to not be disclosed on public documents. Your request must be made in writing, but it is not required that you use this form.

state of Kansas. I hereby re registration be concealed f	rom public inspection and not disclo	of the county of, indicated on my application for voter osed on any list or record available for public vasion of personal privacy or threat to my
Name of Voter (print)		
Signature of Voter		
Residential Address		
City/State/Zip		

Prepared by the Office of Secretary of State Ron Thornburgh



#### SEDGWICK COUNTY CHECKLIST

### REQUEST FOR REMOVAL OF NAME AND HOME ADDRESS/HOME OWNERSHIP FROM PUBLIC ACCESS

PURSUANT TO K.S.A. 2021 Supp. 45-221 (a)(51)

REQUEST FOR REMOVAL OF NAME AND HOME ADDRESS/HOME OWNERSHIP FROM PUBLIC ACCESS: (*Please note this form is valid for 5 years; renewal will be the responsibility of the requester.*)

□ SEDGWICK COUNTY CLERK\*\*
100 N. Broadway,
Suite 620 Wichita, KS
67202
(316)660-9223

#### REQUEST FOR NON-DISCLOSURE OF RESIDENTIAL ADDRESS:

□ ELECTIONS OFFICE 510 N. Main, Suite 101 Wichita, KS 67203 (316)660-7100 \*\*COVERS THE FOLLOWING OFFICES:

- ✓ REGISTER OF DEEDS
- ✓ APPRAISER
- ✓ TREASURER
- ✓ GEOGRAPHIC INFORMATION SERVICES (GIS)

IF YOU HAVE CONCERNS THAT YOUR MUNICIPALITY(S) IN SEDGWICK COUNTY MAY DISCLOSE YOUR HOMEOWNERSHIP INFORMATION, WE HAVE INCLUDED A LIST OF LOCAL MUNICIPALITY CONTACT INFORMATION FOR YOUR CONVIENENCE.

CITY OF ANDALE	CITY OF COLWICH	CITY OF HAYSVILLE	CITY OF PARK CITY
326 N. MAIN	310 S. SECOND	200 W. GRAND AVE.	6110 N. HYDRAULIC
ANDALE, KS 67001	COLWICH, KS 67030	HAYSVILLE, KS 67060	PARK CITY, KS 67219
(316)444-2351	(316)796-1025	(316)529-5900	(316)744-2026
CITY OF BEL AIRE	CITY OF DERBY	CITY OF KECHI	CITY OF SEDGWICK
7651 E. CENTRAL PRK AVE.	611 N. MULBERRY ROAD	220 KECHI ROAD	511 N. COMMERCIAL
BEL AIRE, KS 67226	DERBY, KS 67037	KECHI, KS 67067	SEDGWICK, KS 67135
(316)744-2451	(316) 788-1519	(316)744-9287	(316)772-5151
CITY OF DENTE DV	CAMINA OF THE CAMPO DOLLARY	OUTS OF MANGE	CIMIL OF THE LEFT CONTROL
CITY OF BENTLEY	CITY OF EASTBOROUGH	CITY OF MAIZE	CITY OF VALLEY CENTER
150 S. WICHITA	1 DOUGLAS AVENUE	10100 W. GRADY AVENUE	121 S. MERIDIAN
BENTLEY, KS 67016	EASTBOROUGH, KS 67207	MAIZE, KS 67101	VALLEY CENTER, KS
(316)796-1799	(316) 682-4111	(316)722-7561	67147
			(316)755-7310
CITY OF CHENEY	CITY OF GARDEN PLAIN	CITY OF MOUNT HOPE	
131 N. MAIN	505 N. MAIN	112 W. MAIN	CITY OF VIOLA
CHENEY, KS 67026	GARDEN PLAIN, KS 67050	MOUNT HOPE, KS 67108	121 S. MAIN ST.
(316) 540-3622	(316)531-2321	(316)661-2211	VIOLA, KS 67149
			(620)584-4686
CITY OF CLEARWATER	CITY OF GODDARD	CITY OF MULVANE	
129 E. ROSS AVE.	118 N. MAIN	211 N. 2 <sup>ND</sup> AVE	CITY OF WICHITA
CLEARWATER, KS 67026	GODDARD, KS 67052	MULVANE, KS 67110	455 N. MAIN
(620)584-2311	(316)794-2441	(316)777-1143	WICHITA, KS 67202
			(316) 268-4529