

Case No. \_\_\_\_\_

**REQUEST  
TO RELEASE  
SEALED RECORDS**

I, \_\_\_\_\_, request that sealed records in this case be released to:

Myself; or

\_\_\_\_\_  
(name of person to receive sealed records)

\_\_\_\_\_  
(address of person to receive sealed records)

The release of sealed records at my request is allowed by Nebraska Revised Statute

I request that the following documents from my case be released to the above-named person:

The entire case file, or

The following document(s) (please be specific)

\_\_\_\_\_  
I am paying the cost of released copies.

Those copy(ies) authorized for release can be mailed to the party at the address specified above.

Those copy(ies) authorized for release can be mailed to me at the address specified in the signature block on the next page.

The person to whom the documents are released will pay for and pick up the copies.

**Valid Identification will be required for release of records to the person specified above.**

**DO NOT SIGN UNTIL YOU ARE IN THE PRESENCE OF A NOTARY.**

I hereby swear, or affirm, under penalty of perjury, that the above information is true.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name of defendant: \_\_\_\_\_

Street Address/P.O. Box: \_\_\_\_\_

City/State/ZIP Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\*Email address: \_\_\_\_\_

\*[Nebraska Supreme Court Rule § 2-208](#) requires individuals who are not attorneys and representing themselves to provide their email address. The court will use the email address to send notices from the court about this case **except** for items that require another type of service as directed by statute or Nebraska Supreme Court Rule.

If you no longer have email capability or if your email or other contact information changes, you must complete a [Change of Contact Information Form](#).

By checking this box, I am letting the court know that I do not have the ability to receive emails. The reason I cannot receive email is: \_\_\_\_\_

\_\_\_\_\_

If completed by an attorney:  
Bar Number: \_\_\_\_\_

**VERIFICATION**

State of \_\_\_\_\_ )

) ss.

County of \_\_\_\_\_ )

This document was acknowledged before me by \_\_\_\_\_,

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_ Notary commission expires: \_\_\_\_\_

Signature of Judge/Clerk of the Court/Notary Public

Title: \_\_\_\_\_ Serial Number (if any): \_\_\_\_\_