

IN THE 16TH CIRCUIT COURT OF JACKSON COUNTY, MISSOURI
 PROBATE DEPARTMENT

COPY REQUEST FORM

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| Will | | | | | | | |
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| Order of Distribution | | | | | | | |
| Order of Discharge | | | | | | | |
| Order of Refusal of Letters | | | | | | | |
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NOTE: Payment must be received before your request will be processed. Please allow 5-7 business days after payment for processing.

This request can be mailed to the addresses listed below. Attorneys may eFile their requests.

For Kansas City Cases - Probate Department, 415 E. 12th Street, 9th Floor, Kansas City, Missouri 64106. (Fax 816-881-3228)
 For Independence Cases - Probate Department, 308 W. Kansas, Suite 304, Independence, Missouri 64050. (Fax 816-881-1609)

Date _____ Requestor Name _____

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