

DATE _____ PROSECUTOR _____

CASE # _____ NAME _____

DEFENSE ATTORNEY _____

RETAINED APPOINTED REQUEST RECEIVED (DATE) _____

ADDRESS _____

INSTRUCTIONS _____

REQUEST FOR DISCOVERY AND INSPECTION WITH RECIPROCAL DISCOVERY AGREEMENT

I understand that the Manhattan City Prosecutor’s Office, has an “open file policy” in most cases and that upon request I may be provided the contents of the prosecution’s file insofar as discoverable material is concerned. I am requesting discovery pursuant to K.S.A. 22-3212 and with regard to the above referenced case.

Having sought discovery pursuant to K.S.A 22-3212 and, I agree to produce for the prosecutor to inspect and/or copy all scientific or medical reports, books, papers, documents, and/or tangible objects, which are material and which I intend to produce at any hearing, whether oral or written, and which will not place unreasonable burden on the defense. I further agree that discovery will be completed no later than 20 days after the arraignment. I further recognize my continuing obligation to provide these items to the prosecutor. In addition, the prosecutor’s office recognizes the continuing duty to provide discovery pursuant to the statute.

ACKNOWLEDGMENT OF DUTY OF NON-DISCLOSURE PURSUANT TO K.S.A. 22-3212(b)(5)

By submitting this request for discovery I hereby acknowledge the provisions of K.S.A. 22-3212(b)(5) regarding my obligation of non-disclosure. Specifically, I acknowledge that the discovery provided to me pursuant to this request will contain un-redacted vehicle identification numbers or personal identifiers (as defined by K.S.A. 22-3212(b)(4) and that I am prohibited from disclosing the same to the defendant or any other person, directly or indirectly, except as authorized by order of the court.

ACCEPTANCE OF RESPONSIBILITY OF PAYMENT FOR DIGITAL MEDIA (check one)

_____ If any digital media (such as photographs and videos) exists, I hereby request copies be provided. I understand, acknowledge and **accept responsibility for payment of expenses to the applicable law enforcement agency for any duplication expenses.**

_____ I do not want copies made at this time and will arrange a time with the City Prosecutor to inspect the same.

_____ I am Court Appointed counsel representing an indigent person and understand discovery costs will not be assessed by the City Prosecutor’s Office.

OTHER SPECIAL REQUESTS

I understand the discovery provided herein is UNREDACTED and as such I am under an obligation to not disclose any personal identifiers (as defined by K.S.A. 22-3212(5)) to the defendant or any other person, directly or indirectly, except as authorized by order of the court.

Attorney for Defendant