

**ATTACH A COPY OF YOUR INSURANCE CARD AT THE TIME AND DATE OF YOUR TICKET WITH THIS FORM. THE DATE MUST BE THE SAME AS THE DATE ON YOUR TICKET.**

IN THE CIRCUIT COURT OF CLAY COUNTY

STATE OF MISSOURI

V.

\_\_\_\_\_  
Defendant (print your full name)

\_\_\_\_\_  
Case number (ticket #)

**MOTION TO DISMISS VIOLATION OF FINANCIAL RESPONSIBILITY  
(INSURANCE) WITH THE SUBMITTAL OF PROOF OF VALID INSURANCE**

**I am the defendant in the above-named and numbered case. I request that this offense be DISMISSED.** In support of my request for Dismissal, I enter my plea of "Not Guilty" to the offense of **VIOLATION OF FINANCIAL RESPONSIBILITY** under §303 RSMo. Along with my plea, I am providing the court with proof of a valid policy on the date of the offense. The proof provided is a copy of written proof of insurance as provided to me by the issuing insurance company. In submitting this proof, I certify and swear this proof is:

1. Valid on the date I was issued the citation;
2. Valid for the vehicle I was operating at the time of the citation;
3. If the vehicle I was operating belonged to another, I was covered under the policy and was not excluded;
4. Is valid, and if it is not, I understand that I may be prosecuted for Forgery.

I understand that the above-numbered offense will **NOT BE DISMISSED** until the policy has been verified as being in full force and effect on the date and time of the offense as alleged.

**I UNDERSTAND THAT IF THE POLICY SUBMITTED CAN NOT BE VERIFIED, THIS CASE WILL NOT BE DISMISSED, AND I MUST APPEAR AT A HEARING AT A LATER DATE AND TIME, AS NOTIFIED BY THE COURT.**

My current mailing address for all notices related to this matter is: (PLEASE PRINT)

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Further, I understand that it is my responsibility to provide the Court Clerk in writing with any change of address while this case is pending.

Defendant signature: \_\_\_\_\_ Date of submission: \_\_\_\_\_

If you visit in 10 days, [www.courts.mo.gov/casenet](http://www.courts.mo.gov/casenet), and type in your case number above and nothing is returned, the Judge has dismissed your case.

\_\_\_\_ Confirmed \_\_\_\_ Unconfirmed

\_\_\_\_\_  
Clerk                      Date

Motion to Dismiss \_\_\_\_ Granted \_\_\_\_ Denied  
SO ORDERED:

\_\_\_\_\_  
Judge    Date