NON-LAWYER MUNICIPAL JUDGES' ANNUAL REPORT OF CLE COMPLIANCE

(Report is **due by July 31** of each reporting year.)

(Please print or type)

Name: _____ _____ _____
(Last) (First) (Middle Initial)

Last four digits of your social security number: _____

Preferred Mailing Address: _____

Daytime Telephone: _____

Check one: This is my:

☐ Office Address ☐ Municipality Address ☐ Other: _____

Do you have an iNotes account? ☐ Yes ☐ No

Your e-mail address: _____

Please list **all** municipalities served accompanied by the date your term began for each:

_____

_____

My title is:

☐ Municipal Judge ☐ Provisional Judge ☐ Substitute Judge

☐ Other: _____

CREDIT SUMMARY

(Note: Programs and activities must be listed on the reverse side).

Number of Credit Hours

a. Accredited programs and activities in this reporting year (Reg. 18.04) _____
Please indicate: Of these CLE hours,

_____ hour(s) are ethics credit. (Rule 18.05(b)

_____ hour(s) are elimination of bias credit (Rule 18.05(b)

b. Speaker credit (Reg. 18.06.1) (Must complete reverse side): _____

c. Carryover hours from immediately preceding reporting year to be applied this year: _____
(Carryover hours may not exceed 15 hours for non-lawyers and 5 hours for lawyers.)

d. **TOTAL CREDIT HOURS** (Add lines A through C): _____

e. Number of CLE hours to be carried over to the next reporting year*: _____
*NOTE: Annual carryover hours may not exceed 15 hours for non-lawyers or 5 for lawyers.

FIRST-YEAR REPORTING WAIVER FOR NEW JUDGES:

☐ Initially elected/appointed during this reporting year. Date appointed or elected: _____ (Reg. 18.05.2)

REQUEST FOR EXEMPTION OR EXTENSION:

☐ I hereby request a Hardship Exemption for this reporting year. (Please also complete and return Hardship Exemption form.) (Waiver or extension previously granted pursuant to Reg. 18.05.3.)

☐ I hereby request additional time to complete my required hours for the reporting period covered by this report, pursuant to Regulation 18.06.3. Hours **must** be completed and reported by December 1 of this year. Attached is the Extension request with a proposed plan for making up my deficiency.

I hereby swear or affirm that the information given on this form is, to the best of my knowledge, accurate and complete.

Signature: _____

Date: _____

Form continued on next page ⇨

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Continuing Education Programs and Activities - **Courses Must be Specific to Municipal Judge Education**

DATE(S)	SPONSOR NAME	COURSE TITLE	LOCATION	ETHICS HOURS	ELIM OF BIAS HRS	HOURS*	OSCA USE
			TOTAL CREDIT HOURS				

Continuing Education Speaker Credit

DATE(S)	PRESENTATION/SUBJECT MATTER	SPONSOR NAME	LOCATION	HOURS* PREPARATION	HOURS* PRESENTATION	OSCA USE
			TOTAL CREDIT HOURS			

*"Hours" means accredited Continuing Legal Education (CLE) credit hours. Courses **must** be specific to **judge** education. To determine the number of CLE hours, divide the total minutes by 50 and round to the nearest one-tenth (.1) of an hour. If additional space is needed, please make additional copies of this page.

NOTE TO MUNICIPAL JUDGES WHO ARE LAWYERS: You no longer have to report your Municipal Judge CLE hours to OSCA. Please report them directly to The Missouri Bar.

Return by July 31 to: Municipal Judge Education Committee, Office of State Courts Administrator, P. O. Box 104480, Jefferson City, MO 65110.

FAX: ATTN: Tina Dillon (573) 522-5013
****Please retain a copy of this report for your official record.****

Revised 4/9/26