MISSOURI DEPARTMENT OF Form V=NU= Motor Vehicle Accident Release Case Number hereby forever release and discharge Ι. any heirs, executors, administrators, and all firms, corporations, and persons on their behalf liable, from all claims, demands, damages, actions, or causes of action arising from or growing out of, any and all personal injuries and property damage, now apparent as well as those which may hereafter develop as a direct or indirect result of a collision which occurred _____ _, at or near (MM/DD/YYYY) Missouri. Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. Signature Printed Name of Person Giving Release Signature Date (MM/DD/YYYY) ____/____/______ Embosser or black ink rubber stamp seal Subscribed and sworn before me, this day of year **Notary Required** State County (or City of St. Louis) My Commission Expires Notary Public Signature Notary Public Name (Typed or Printed)

Additional Release of Parent or Guardian For Injuries to Minor Child

_____, state that I am the parent or guardian of ______

a minor under 18 years of age, and that the above release is made at my request and that I make this release for said minor child,

and that I agree to hold harmless any person against any action, claim or demand for said minor child or any other person for

injuries or damages to said minor child.

Ι, _

	Unde	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.				
Signature	Printe	Printed Name of Person Giving Release				
Sigr	Signa	ature		Date (MM/DD/YYYY)		
•				//		
	E	mbosser or black ink rubber stamp seal	Subscribed and sworn before me, this			
_				day of	year	
quirec			State	County (or City of St. Louis)	My Commission Expires	
Notary Required			Notary Public Signature			
Ž			Notary Public Name (Typed	or Printed)		
Mail to: Phone: Fax: E-mail:		Driver License Bureau 301 West High Street - Room 470 P.O. Box 200	Ever served or	/drivers/ for additional informatio	tates Armed Forces?	
		Jefferson City, MO 65105-0200 (573) 751-7195 (573) 526-7365 dlbmail@dor.mo.gov	military individuals.	If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u> .		