



Judge Michael Easton
Municipal Court

MUNICIPAL COURT REFUSAL HEARING REQUEST FORM
MRH301 (rev. 3/22)

Date _____

I would like to inform Kenosha Municipal Court that I am requesting a hearing on the reasonableness of the refusal issued to me on:

Ticket #: _____
Case # _____
Violation Date: _____

(Last name)

(First name)

_____-_____-_____
(Social Security #) (date of birth)

(Address, APT#)

(City, State, Zip)

(Phone and Email)

(SIGNATURE)