

PUBLIC RECORDS REQUEST

There is no charge for the first copy of the report if you are **the defendant, the victim, or media representative**. All other interested parties are required to pay a \$5.00 research and copy fee. Fees are to be paid in advance. Your request will be filled within 2-3 business days.

Name _____

Company Name _____

Address _____

Phone Number _____

Defendant Name _____ Case Number _____

Document Requested _____

Reason _____

*I affirm that the information contained in these documents will not be used for soliciting business for pecuniary (financial) gain.

Signature

Date

Pursuant to C.R.S. 24-72-203(2)(a): Extenuating circumstances may prevent the record from being available for 3 business days.

For Records Use Only:

Fee Paid: _____

Date: _____

Date request filled: _____

Request filled by: _____

Request picked up on: _____