



# Sheriff's Office

Office (970) 824-4495  
Fax (970) 824-3542

## Records Release Form

Date of Request \_\_\_\_\_ Case Number \_\_\_\_\_

Requestor's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Information Address \_\_\_\_\_ Phone \_\_\_\_\_

What is the nature of the information you are requesting? \_\_\_\_\_

Name of person you are inquiring about \_\_\_\_\_

What is your interest in this information? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

24-73-305.5 Access to records-denial by custodian-use of records to obtain information for solicitation. Records of official actions and criminal justice records and the names, addresses, telephone numbers, and other information in such records shall not be used by any person for the purpose of soliciting business for "pecuniary gain". The official custodian shall deny any person access to records of official actions and criminal justice records unless such person signs a statement which affirms that such records shall not be used for the direct solicitation of business for pecuniary gain.

By signing this form I acknowledge that I have read and understand the above Colorado Revised State Statute.

Requestor's signature \_\_\_\_\_ Date \_\_\_\_\_

Record request received; ( ) In Person ( ) By Mail

Information furnished Date \_\_\_\_\_ Time \_\_\_\_\_

Record Clerk's signature \_\_\_\_\_  
Denial of inspection: Reason for Denial (check appropriate)  
( ) Contrary to state statute  
( ) Prohibited by rules or order of court  
( ) Contrary to Public Interest  
( ) Other \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_