



WHEAT RIDGE MUNICIPAL COURT JEFFERSON COUNTY, STATE OF COLORADO 7500 W. 29 th Avenue Wheat Ridge, CO 80033 Phone: 303-235-2835 Fax: 303-235-2829	<div style="text-align: center;">  COURT USE ONLY  </div>
THE CITY OF WHEAT RIDGE BY AND ON BEHALF OF THE STATE OF COLORADO v. <div style="text-align: right;">_____, Defendant</div>	
Attorney for the Defendant (or Pro-Se): Phone: _____ Fax: _____	Case Number: _____
REQUEST FOR RECORDS	

Pursuant to C.R.S. §24-72-203: Requests for records will be processed within three working days of the written request, unless extenuating circumstances exist beyond the control of the Custodian of Records.

Date of Request: _____ Time of Request: _____

Summons No: _____ Case Report No: _____

Defendant's Name: _____

Defendant's DOB: _____

Information Requested: _____

Name of party requesting records (PRINT): _____

Address: _____

Message Phone: _____

I understand that according to C.R.S. §24-72-205.5, I am prohibited from using these records for the purpose of soliciting business for pecuniary gain.

Signature of Requestor

-----OFFICE USE ONLY-----

Fee: _____

Receipt # _____

Date Provided: _____

Time Provided: _____

Method Provided: _____

Hand Delivered/In Person: _____

Provided By: _____

Authorized By: _____

Notes: _____