Boulder Municipal Court

Boulder County Justice Center P.O. Box 8015 1777 6th Street Boulder, CO 80306-8015 (303) 441-1842 (303) 441-1811 FAX

Online Requests: www.bouldercolorado.gov/municipal-court

REQUEST TO REVIEW A RECORD

Requestor's Name:	Telephone:
Full Address:	
Fax:	
I would like to receive the recor	rds by: Email or Fax or Regular Mail or Pick-up (you will be contacted when ready for pickup)
Documents Requested:	
Defendant Name:	Date of Birth:
Reason for Request:	
	o C.R.S. 24-72-305.5, I am prohibited from using these iciting business for pecuniary gain.
	Signature of Requestor
Records Released:	
Clerk/Judge Signature:	Date:

NOTE: THERE IS A \$5.00 FEE FOR THE FIRST 10 PAGES AND \$.25 FOR EACH PAGE THEREAFTER