



**APPLICATION FOR COLUMBINE DOCUMENTS**  
**RECORDS UNIT 303-271-5542 FAX 303-271-5552**  
**200 Jefferson County Parkway, Golden, CO 80401**  
**Attn: Records Email: Records@Jeffco.us**

Reply may take up to ten working days. Please allow adequate time for processing and mailing.

**COLUMBINE DOCUMENTS REQUESTED:**

**\*FOR INTERNATIONAL SHIPMENTS, PLEASE REVIEW THE INSTRUCTIONS ON OUR WEB PAGE**

ITEM NUMBER	ITEM DESCRIPTION	FEE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL FEES \$ \_\_\_\_\_  
 (Includes shipping & handling)

\*Please attach a separate page for additional items

**PER COLORADO REVISED STATUTE 24-72-305.5 ACCESS TO RECORDS/DENIAL BY CUSTODIAN  
 USE OF RECORDS TO OBTAIN INFORMATION FOR SOLICITATION**

**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 (MONETARY GAIN).**

I, \_\_\_\_\_ ACKNOWLEDGE AND UNDERSTAND the above statement and I am not requesting this information for the solicitation of business for pecuniary gain.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City, State Zip \_\_\_\_\_ FAX # \_\_\_\_\_

Email: (optional) \_\_\_\_\_

*FOR INTERNAL USE ONLY*

REQUEST GRANTED AUTHORIZED BY: \_\_\_\_\_

CASH \_\_\_\_\_  CHECK # \_\_\_\_\_  MC/VISA INVOICE # \_\_\_\_\_

COMPLETED BY \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

MAIL DATE: \_\_\_\_\_

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**TO BE COMPLETED BY CUSTOMERS USING MASTER CARD OR VISA**

CREDIT CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

SECURITY CODE \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_

(Last three digits that appear in signature panel on back of card)