

## LARIMER COUNTY SHERIFF'S OFFICE **Administration Division - Records Section** Charge Summary Report

All requests for records must be made through the Records Section of the Larimer County Sheriff's Office. Research fees must be paid at the time request is made. Costs for reproduction of records have been authorized by Colorado Revised Statute 24-72-306 and set by Larimer County Resolution 07012008R004.

Date of Request:

Records certified  $\square$  Yes  $\square$  No Clearance Letter Notarized 
Yes No

A nonrefundable research fee of \$7.50 is required before research will begin on this request. This fee includes search, retrieval, and review.

## \*Records are generated by LCSO information only and available from 2005 to present. Report includes dates, times, and charges of bookings into the Larimer County Jail. It will also include charges via citation, summons or warrant by the LCSO. They DO NOT include court dispositions or DMV Records.

<u>RINT</u>	Ξ	S	EA	L	P
-------------	---	---	----	---	---

Full Name of Person:	Date of Birth:

Name of Requester:		Date of B	irth:			
Company / Agency Name:				·		
Requester Address:		City		State	Zip	Phone:
When request is complete (choose one)	Mail	Call to Pic	c Up	Fax	🗌 E-mail	
E-mail to:			Fax #:			

CRS 24-72-305.5 - 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 soliciting business for pecuniary gain. The Official Custodian or designee 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.

I affirm that I shall not use the requested information for direct solicitation of business for pecuniary gain and acknowledge that such violation is a petty offense under CRS 24-72-309.

Requester's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

## Signed request forms can be emailed to: sheriffreports@larimer.org or faxed to: 970-482-8745

RECORDS USE ONLY

RECEIVED BY:	DATE:	<u>Paid:</u>	CREDIT CARD: Type
PROCESSED BY:	DATE:	□ No □ Waived	NO
RELEASED BY:	DATE:	FORM OF PAYMENT: Cash	cvv
MAILED  PICKED UP	# OF PAGES RELEASED	Certification 🗆 Yes 🗆 No	Clearance Letter needed: 🗆 Yes 🗆 No
EMAILED      FAXED	LOGGED	Notarized □ Yes □ No	Letter Written: 🗆 Yes 🗆 No

Revised 04/08/2025