

District Court _____ County, Colorado Court Address:		
Petition of:		
Defendant (Primary subject of the criminal justice record)		▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address):		Case Number:
Phone Number:	E-mail:	Division Courtroom
FAX Number:	Atty. Reg. #:	
CERTIFICATE OF SERVICE		

I certify that on _____ (date), a copy of the Order and Notice of Hearing and Petition to Seal Arrest and Criminal Records or Petition to Seal Criminal Conviction Records was served on the parties listed below (include name and address) by:

Hand Delivery Faxed to this number _____ or

by placing it in the United States mail, postage pre-paid, and addressed to the following:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Date: _____

Signature of Petitioner

Note: This Certificate of Service must be provided to the Court on or before the hearing date identified on the Order and Notice of Hearing.