



Garden City Police Records

621 27th St Rd

Garden City, CO 80631

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Email: danielle@townofgardencity.com

Requester's Name: _____ Date: _____

Relation to Case: _____

Requester's Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email Address: _____

Report Number: _____

Date & Time of Incident: _____

Type of Incident: _____

Person Involved: _____ DOB: _____

Other Remarks: _____

USE OF THIS INFORMATION IS REGULATED BY LAW - DO NOT DISSEMINATE Note: According to the Colorado Revised Statute 24-72-305.5, records of official action, criminal justice records, or the names address, telephone numbers, and other information in such records shall not be used by any person for the purpose of directly soliciting business for pecuniary gain. A violation of this section subjects you to misdemeanor charges and upon conviction, a fine of \$100 or 90 days in jail or both.

I affirm that I will not use the records, or any portion of the records requested for the purpose of directly soliciting business for pecuniary gain.

Signature: _____ Date: _____

For Official Use Only:

Received by: _____ Date: _____

Released Yes No by: _____ Date: _____

No Record Denied Per: _____