

Weld County District Attorney's Office Request Form Colorado Open Records Act/Colorado Criminal Justice Records Act Pursuant to Colorado Revised Statutes §24-72-200.1 et seq., and §24-72-301 et seq.:

Name:		_
Agency:		
Address:		
Phone:Fa	ıx:	
Email:		
Case Number of file you are requesting: <u>18CR200</u>	03	
Defendant's Name: Christopher Watts		
What is the purpose of your request?		
_		
PRINTED NAME		
PRINTED NAME	Date	
SIGNATURE		