

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> Petitioner of: _____ <hr/> Petitioner: _____	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): _____ <hr/> Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg.#: _____	Case Number: _____ <hr/> Division Courtroom
PETITION FOR EXPUNGEMENT OF RECORDS FOR A LAW ENFORCEMENT CONTACT NOT RESULTING IN REFERRAL TO ANOTHER AGENCY	

I, _____, petition the Court for an expungement of records pursuant to C.R.S. § 19-1-306(6)(b)(I).

1. Information about the Petitioner: _____ Date of Birth: _____

Current Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Work Phone #: _____ Cell #: _____

Date of Contact	Agency Case Number	Contacting Agency

2. One year has passed since I had the contact with a law enforcement agency that did not result in a referral to another agency.

3. I have not been adjudicated as a juvenile delinquent for, or convicted of, any felony offense or misdemeanor offense involving domestic violence, unlawful sexual behavior, or possession of a weapon since the law enforcement contact.

4. There are currently no felony, misdemeanor, or delinquency actions pending or being instituted against me.

5. I request that this Petition be set for a hearing.

VERIFICATION AND ACKNOWLEDGMENT

I, Petitioner, swear/affirm under oath, and under penalty of perjury, that I have read the foregoing *PETITION FOR EXPUNGEMENT OF RECORDS FOR A LAW ENFORCEMENT CONTACT NOT RESULTING IN REFERRAL TO ANOTHER AGENCY* and that the statements set forth therein are true and correct to the best of my knowledge.

Signature of Petitioner

Date

The foregoing instrument was subscribed and affirmed, or sworn before me in the County of _____,
State of Colorado, this ____ day of _____, 20____, by the Petitioner.

My Commission Expires: _____

Signature of Attorney

Notary Public/Deputy Clerk