

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> <input type="checkbox"/> People of the State of Colorado in the Interest of: <input type="checkbox"/> People of the State of Colorado v. <input type="checkbox"/> People of the City of _____ v. Petitioner: Date of Birth:	▲ <b>COURT USE ONLY</b> ▲ <hr/> Case Number:  Division                      Courtroom
<b>ORDER OF EXPUNGEMENT OF RECORDS FOR A LAW ENFORCEMENT CONTACT          NOT RESULTING IN REFERRAL TO ANOTHER AGENCY</b>	

**This matter having come before this Court on the Petitioner’s *Petition for Expungement of Records for a Law Enforcement Contact Not Resulting in Referral to Another Agency*, the Court finds:**

Notice, as required by §19-1-306(5)(a), C.R.S., has been given to the prosecuting agency and other interested persons determined by the Court.

At least one year has passed since the contact with a law enforcement agency that did not result in a referral to another agency.

There are no felony, misdemeanor, or delinquency actions pending or being instituted against the Petitioner.

The expungement is in the best interest of Petitioner and the community.

The Court also finds that:

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**The Court Orders That:**

1. The following record(s) can be expunged.

Date of Contact	Agency Case Number	Contacting Agency

2. Upon any inquiry in this matter, all persons in charge of expunged records shall reply that no record exists.
3. The records shall be available to any judge or probation department for use in any future juvenile or adult sentencing hearing regarding the Petitioner.
4. The Court shall mail a copy of this Order to the following:
  - Law Enforcement Agency \_\_\_\_\_
  - Colorado Bureau of Investigation, 690 Kipling Street, Suite 3000, Attn: Identification- Seals Lakewood, CO 80215

Date: \_\_\_\_\_

Judge  Magistrate

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### CERTIFICATE OF SERVICE

I certify that on \_\_\_\_\_ (date), I  e-filed,  hand-delivered or  mailed a copy of this Order to the following address:

To:  Petitioner and/or  Petitioner's Attorney

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To:  Colorado Bureau of Investigation  
690 Kipling St. Suite 3000  
Attn: Identification- Seals  
Lakewood, CO 80215

To:  Law Enforcement Agency

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\_\_\_\_\_  
Clerk