

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:		
FAX Number:	Atty. Reg. #:	Division	Courtroom
<b>CERTIFICATE OF SERVICE</b>			

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 each person or agency listed below (include name and address) by: ☐ Hand Delivery or ☐ by placing it in the United States mail, postage pre-paid. (**PLEASE NOTE:** if the Court or §§24-72-704, 24-72-705, 24-72-708 or 24-72-710 required you to serve a person or entity by certified mail, you must attach the certified mail receipt(s) to this form.)

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.