

GAIN.

## **City of Rocky Ford**

**OPEN RECORD** 

FOR INSPECTION/COPYING OF RECORD

DISPATCH: 719-254-3344 CITY HALL 719-254-7414



CASE REPORT #	FORMAL COMPLAINT FILED		
NAME:		DOB:/_	/
АКА'S:	SSN:		
ADDRESS:	CITY:	STATE:	
DATE OF OCCURRENCE:			
ADDRESS OF OCCURRENCE:			
RECORDS CHECK (RECORDS OF OFFICIAL ACTI	ON): \$10.00		
□ POLICE REPORT: \$7.00 PER REPORT UP TO 15	PAGES, THEN \$.25 PER PAGE		
CALL FOR SERVICE (DISPATCH CALL): \$.25 PER	PAGE		
□ PHOTOGRAPH(S): \$2.50			
RESEARCH AND PREPERATION FEES: \$33.50 P	ER HOUR		
□ BODY CAMERA VIDEO: \$36.00 FOR UP TO 1 H	OUR RESEARCH, THEN \$33.50 PER I	HOUR	
🗆 ACCIDENT REPORT: \$8.50 (REPORTS CAN BE C	BTAINED ON CRASHDOCS.ORG FO	R \$4.25)	
OTHER (PLEASE DESCRIBE):			
		TOTAL:	
YOUR SIGNATURE ACKOWLEDGES THAT YOU W STATUTE 24-72-305.5. THE RECORDS RELEASED		· · · · ·	

ALL CHECKS/ MONEY ORDERS MUST BE PAYABLE TO <u>CITY OF ROCKY FORD POLICE DEPARTMENT</u>

**IMPORTANT- PLEASE READ:** ANY REQUESTED REORD WILL BE HELD FOR 30 DAYS. IF NOT PICKED UP WITHIN 30 DAYS, THE RECORDS WILL BE DESTROYED AND WILL NEED TO BE RE-ORDERED. NO REFUNDS WILL BE MADE AND NEW FEES WILL APPLY TO ALL RE-ORDERED RECORDS. FEES SUBJECT TO CHANGE WITHOUT NOTICE.

SIGNATURE	DATE
PRINTED NAME	DRIVER'S LICENSE/ ID NUMBER
EMAIL	PHONE NUMBER
REV. 11/2022	