

**Boulder County Sheriff's Office – Jail Division
Audio CD – Video Request Form**

To request a copy of a Jail Audio CD or Jail Video, you must complete this form in its entirety. Incomplete requests will be returned. If you do not have the information requested, mark "unknown." Completed form may be faxed to 720-564-2674.

*****Jail Video has NO audio recording capability. Audio records are limited to inmate-placed phone calls only.*****

Copies of audio CDs and/or videos are provided at the following schedule of fees:

Materials and equipment:	\$2.00	Copy of Audio or Video CD:	\$15.00
Search and CD burning (per hour) (1 hour minimum; first hour free):	\$30.00	Thumb drive of requested materials (large requests or by request):	\$20.00
Mailing (requires payment in full prior to mailing):	\$3.00	Rush Request (less than seven (7) days between request and date needed):	\$10.00

*****We require a \$30.00 deposit before we will process your request.*****

Please make your payment to the Boulder County Sheriff's Office. All balances are due when you pick up your CD and/or video at the Boulder County Sheriff's Office Records Section, 5600 Flatiron Parkway, Boulder, Colorado 80301.

Materials may be mailed but only after the Sheriff's Office has received full payment.

Today's Date: _____ Date Needed by: _____

Requestor's Name: _____ Agency: _____

Requestor's Address: _____ City: _____

Zip: _____ Daytime Phone: _____ Email Address: _____

Defendant Name: _____ Docket # _____ Hearing Date: _____

Department Case Number: _____ Agency: _____ Booking Number: _____

Date of Incident: _____ Time Reported: _____ Type of Incident: _____

Beginning Time: _____ End Time: _____ (Two hours maximum per request)

Request is for: Video CD Audio CD Both

What information are you looking for? *Be specific and give facts related to the incident (date/time of phone calls or event, numbers dialed, area(s) of the jail involved for video requests). Please also be aware that jail video footage does not contain any audio recording.*

I would like the Audio CD and/or Video CD mailed to me (only if prepaid)

I will pick up at the BCSO Records Section

Sent through Inter-Office Mail to: _____

Request form completed by: _____

I swear and affirm that I will not use the records I am requesting for pecuniary gain.

Signature

Date

Records/Jail Division Use Only

Date Received: _____ CD/Video completed by: _____

Date Completed _____ Notification Made? _____ Via: _____