



denver animal shelter

Colorado Open Records Act (CORA) Request Form

_____ (Initial) I wish to make a formal request under the Colorado Open Records Act (CORA). I understand that this records request and CORA itself does not necessarily allow me to obtain any and all records I am asking for and that some information may be redacted in accordance with the law. I also understand this request may require payment to the Denver Animal Protection.

My Contact Information (Please Print Clearly):

Name _____ Phone Number _____
Address _____
Email Address _____

My request is regarding the following (select/complete all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Dog/Cat Bite | <input type="checkbox"/> Complaint Made Against Me |
| <input type="checkbox"/> Dog Attack | <input type="checkbox"/> Complaint I Filed |
| <input type="checkbox"/> Rabies Exposure from Wild Animal | <input type="checkbox"/> Other |

Relevant Address for this request: _____
Activity or ticket number: _____ Date of incident: _____

My Specific Request:

I Would Like to Receive My Request By (please circle one): Email Mail In Person
(Please be advised request will be sent to address/email provided in contact information)

Signature _____ Date _____

For Office Use Only

Request Received By _____ Date _____
Request Completed By _____ Date _____
Request Delivered Via Email _____ Mail _____ Pick-Up @
DAP _____