COLORADO DEPARTMENT OF REVENUE
CRIMINAL INVESTIGATION SECTION
CITIZEN INFORMANT REPORT

CDOR use only

CIR#_____

Date_____

Report taken by_____

INFORMATION ABOUT THE PERSON YOU ARE REPORTING		
Name of individual:		
Date of birth:	SSN:	Phone:
Address:		
City:	State:	ZIP Code:
Occupation:	E-mail address:	
Marital status:	Name of spouse:	

INFORMATION ABOUT THE BUSINESS YOU ARE REPORTING		
Name of Business:		Phone:
Employer Tax ID number (FEIN):	Website:	
Address:		
City:	State:	ZIP Code:

DESCRIBE THE ALLEGED VIOLATION				
Income Tax: ☐	Sales Tax: ☐	Withholding Tax: ☐	Failure to File: ☐	Other: *(describe below)*

COMMENTS *(Briefly describe the facts of the alleged violation, i.e., who, what, when, where, and how you learned about and obtained the information in this report. Attach another sheet, if needed):*

INFORMATION ABOUT YOURSELF		
This information is not required to process your report, but would be helpful if we need to contact you for any additional information.		
Your name:		
Address:		Phone:
City:	State:	ZIP Code:

WHERE TO SEND THIS FORM

E-mail: dor_taxinvestigations@state.co.us
Fax: 303-866-5843

CDOR-Criminal Investigation Section
PO Box 8825
Denver, CO 80201-8825