DR 2121 (02/05/19)
COLORADO DEPARTMENT OF REVENUE
dor_dealers@state.co.us
www.Colorado.gov/Revenue/AID

Auto Industry Division
P.O. BOX 17087
DENVER, CO 80217-0087
(303) 205-5604

Complaint Form

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Please fill out the form below, type or print *clearly*. Return form via E-mail to: dor_dealers@state.co.us OR hand deliver to the Auto Industry Division. The AID Mailing/Physical address can be found on our website: www.Colorado.gov/Revenue/Aid Describe the events in the order in which they happened and include dates, names, and places. Please use extra sheets if needed. Be accurate and detailed as possible. List all witnesses, addresses and phone numbers.

Name	Email	Cell Phone
znxc.,vmnz.,cbn.,cvmnjkd;fahdjkfhkjgh;phfepwiuqpiry	znxc.,vmnz.,cbn.,cvmnjkd;fahdjkfhkjgh;phfep	(222) 222-2222

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What I have written on this form is true and correct to the best of my knowledge and belief. This information is not confidential and possibly may be released under the Colorado Criminal Justice Records Act.

Signature	Date
	04/02/05