



## Larimer County Sheriff's Office

### Citizen Information Report

Date and Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_  
Address City

Name of Sheriff's Office Employee(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of incident (as detailed as possible):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Continue on back of page)

#### Reporting Party Information:

Name: \_\_\_\_\_  
First Middle Last

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_  
Home Other (cell/work/pager)

\_\_\_\_\_  
Signature Date

