Craig, Colorado 81626

COMPLAINT OR INCIDENT REPORT

Request for investigation

Colorado Outfitters Association, Inc

Illegal Outfitting/Guiding Activity Report

(Request for Investigation)

Person((\mathbf{S})) subm	itting	this	Re	port:
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Name:		
Street Address:		
P.O. Box:	City:	
County:	State:	Zip Code:
Describe the alleged illegal out	fitting/guiding activ	vity you are reporting.
1. Name(s) and Address(s) of the	hose you are report	ing:
 Is this activity taking place of the content of the c	nit(s) is this activity	
5. What date(s) did this activity 6. Provide as much detailed inf suspect an illegal outfitting/gui (Use additional sheets if necessary)	formation as possib ding activity is beir	le of what you observed and why you ng committed.
Signature of Person(s) filing th	-	Date
Printed Name:		
Send this report to:		
The Colorado Outfitters Assoc	iation	
P.O. Box 849		