Co	ourt District County				
Co	olorado County:				
Co	ourt Address:				
Th V.	e People of the State of Colorado				
De	efendant:	Court Use Only			
	v Name:	Case			
	dress:	Number:			
	one Fax:	Division:			
	nail: Atty. Reg.#:	Courtroom:			
	/y. 1.09				
	Signed Declaration - Firearm and/or Ammunition	Relinquishment			
	(Criminal Mandatory Protection Order)				
This	s form must be filed with the Court within seven (7) business days af	ter the Court issues an order to			
relir	nquish firearms and/or ammunition pursuant to C.R.S. § 18-1-1001(9)(e	e)(II).			
	declare under oath as follow	we.			
	me of Person Relinquishing the Firearms:				
	ail Address:				
Address:					
Phone Number(s):					
	e of Birth:	·			
_					
	Pursuant to C.R.S. §18-1-1001(d)(l), I have sold or transferred possession of the firearm(s) or ammunition listed below to federally licensed firearms dealer:				
	Pursuant to C.R.S. §18-1-1001(d)(II), I have arranged for the storage of the firearm(s) or ammunition listed below with law enforcement agency:				
	Pursuant to C.R.S. §18-1-1001(d)(II), I have arranged for the storage of	of the firearm(s) or ammunition			
Ш					
	listed below with storage facility: which law enforcement agency: has contracted with for the storage of transferred firearms or ammunition.				
		agains of the fire arm (a) ar			
Ш	Pursuant to C.R.S. §18-1-1001(d)(III), I have sold or transferred possession of the firearm(s) or ammunition listed below through a federally licensed firearms dealer to private party:				
	who may legally possess the firearm or ammunition and have complied with all the provisions of C.R.S. §18-12-112 concerning private firearms transfers, including				
	ne transferee.				

Make	Model	Serial Number

(Use page 4 to enter additional firearm information if needed)

Ry checking this boy I am a	acknowledging that I have mad	e a change to the original conten
By checking this box, I am a	acknowledging that I have mad	e a change to the original conten
	Verified Signature	
I declare under penalty of perior	_	at the foregoing is true and corre
	day of	, , at (year)
(city or other location,	and state or co	ountry)
Print Name:		_
Signature:		
Attorney Signature:		
(If any)		(date)
Acknowledgeme	nt of Receipt of Firearm	s and/or Ammunition
Pacaivad by foderally license	d firearms dealer:	
Received by, federally license	d firearms dealer:	
Signature:	 Date and Time: _	
Signature:	 Date and Time: _	
Signature: Received by, law enforcement	Date and Time: _	
Signature: Received by, law enforcement Signature:	Date and Time: _ agency: Date and Time: _	
Signature: Received by, law enforcement Signature:	Date and Time: _ agency: Date and Time: _	
Signature: Received by, law enforcement Signature: Received by, storage facility c	Date and Time: _ agency: Date and Time: _ Date and Time: _ Ontracted by law enforcement	
Signature: Received by, law enforcement Signature: Received by, storage facility c Signature:	Date and Time: _ agency: Date and Time: _ Date and Time: _ Ontracted by law enforcement	 nt agency:
Received by, federally licensed Signature: Received by, law enforcement Signature: Received by, storage facility c Signature: Received by, private party:	Date and Time: _ agency: Date and Time: _ Date and Time: _ Ontracted by law enforcement	 nt agency:

(Continued from Page 2)

Make	Model	Serial Number