



Colorado Bureau of Investigation
Sex Offender Registry
690 Kipling Street
Denver, Colorado 80215
Phone: (303) 239-4222
Fax: (303) 239-4661



COLORADO SEX OFFENDER ADDRESS ADDENDUM

Sex Offender Registration Information

 (Sex Offender Last Name)

 (First Name)

 (Middle Name)

 (Date of Birth)

 (Social Security Number)

Address Information

Address Information

 (Type of Address)

 (Type of Address)

 (Street Address)

 (Street Address)

 (City)

 (State)

 (Zip Code)

 (City)

 (State)

 (Zip Code)

 (County)

 (Begin/End Date – Please Circle)

 (County)

 (Begin/End Date – Please Circle)

Address Information

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 (Type of Address)

 (Type of address)

 (Street Address)

 (Street Address)

 (City)

 (State)

 (Zip Code)

 (City)

 (State)

 (Zip Code)

 (County)

 (Begin/End Date – Please Circle)

 (County)

 (Begin/End Date – Please Circle)

Registrants Initials _____

Address Information	Address Information
<p>_____</p> <p>(Type of Address)</p> <p>_____</p> <p>(Street Address)</p> <p>_____</p> <p>(City) (State) (Zip Code)</p> <p>_____</p> <p>(County) (Begin/End Date – Please Circle)</p>	<p>_____</p> <p>(Type of address)</p> <p>_____</p> <p>(Street Address)</p> <p>_____</p> <p>(City) (State) (Zip Code)</p> <p>_____</p> <p>(County) (Begin/End Date – Please Circle)</p>

Transient/Homeless Location - Lacking a Fixed Address

<p>_____</p> <p>(Street Address or location – List locations you habitually sleep, cross-streets, intersections, directions, landmarks of the location, etc.)</p> <p>_____</p> <p>(City) (State) (Zip Code) (County)</p> <p>Dates you will be at this address/location: From: _____ To: _____</p>
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