|  |  |
| --- | --- |
| STATE OF COLORADO |  |
| OFFICE OF ADMINISTRATIVE COURTS |
| 1525 Sherman Street, 4th Floor Denver, Colorado 80203 |
|  |
|  |  | **,** |
|  |  | , |
|  |
| vs. |  |
|  |  | , |  |
|  |  | **.** |  |
|  | 🟂**COURT USE ONLY** 🟂 |
| Attorney or Party Without Attorney Name and Address): |  |
| First Name |  | Last Name: |  | MI: |  | Suffix |  |  | **CASE NUMBER:** |
| Company |  |  |  |
| Address |  |  |  |  |  |
| City |  | State |  | Zip |  |  |  |
| Phone #: |  | Email: |  |  |  |
| Fax #: |  | Attny Reg: |  |  |  |
|  |  |  |
| **[Enter Pleading Title]** |

[Enter the text of your pleading here.]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **X** |  |  |  |  |
|  | Signature  |  | Attorney Registration Number  |  |
| First Name |  | MI |  | Last Name |  | Suffix |  |  |
| Address |  |  |
| City |  | State |  | Zip |  | Phone  |  |  |
| E-mail |  | Representing |  |  |

|  |
| --- |
| **CERTIFICATE OF SERVICE** |
| I hereby certify that I mailed or delivered true and correct copies of this **[Pleading Title]** to all parties at the addresses shown below.  |
|  |
| First Name |  | MI |  | Last Name |  | Suffix |  |  |
| Company |  |  |
| Address |  |  |
| City |  | State |  | Zip |  | Phone  |  |  |
| E-mail |  | Representing |  |  |
|  |
|  |
| First Name |  | MI |  | Last Name |  | Suffix |  |  |
| Company |  |  |
| Address |  |  |
| City |  | State |  | Zip |  | Phone  |  |  |
| E-mail |  | Representing |  |  |
|  |
|  |  |  |  |
| Service Signature |  | Date served |  |
|  |  |  | **REV 1/18** |