□ District Court □ Denver Juver								
Court Address:	Cou	nty, Colorado						
PEOPLE OF THE STATE OF	E COLORADO							
IN THE INTEREST OF								
AND CONCERNING				▲ COURT	USE ONLY			
AND CONCERNING								
Attorney or Party Without Attorney	Attorney or Party Without Attorney (Name and Address):							
Phone Number: FAX Number:								
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			DING CHILDR	Division EN	Courtroom			
	(nam	e of party) subi	mit the following i	nformation to the (	Court:			
		, , , , , , , , , , , , , , , , , , , ,	3					
	☐ I request that I be permitted to omit the children's address from this Affidavit because I fear that including the							
address will endanger the m	ninor children.							
The minor children are (list	full name and	date of birth): (I	Do not include ad	dress if number 1 a	bove is checked.)			
Full Name of C		date of birth): (I		dress if number 1 a				
	hild have lived with	Date of Birth	persons and in th	Current Addres	within the last five			
Full Name of C  B. The above-named children	hild have lived with	Date of Birth	persons and in the	Current Addres	within the last five			
Full Name of C  S. The above-named children years: (Give name and additional content of the cont	hild have lived with	Date of Birth	persons and in the	Current Address e following places in within the last five	within the last five e years.)			
Full Name of C  S. The above-named children years: (Give name and additional content of the cont	hild have lived with	Date of Birth	persons and in the	Current Address e following places in within the last five	within the last five e years.)			
Full Name of C  S. The above-named children years: (Give name and additional content of the cont	hild have lived with	Date of Birth  the following parties the children	persons and in the	Current Address e following places in within the last five	within the last five e years.)			
Full Name of C  S. The above-named children years: (Give name and additional content of the cont	have lived with ress of all person Addre	Date of Birth  the following pons the children  ess (City/State)  or Civil Union,	persons and in the have lived with Zip Code)  Legal Separation	e following places n within the last five  Time Period (Month/Year)	within the last five e years.)  Relationship to Child			
Full Name of C  B. The above-named children years: (Give name and additional property)  Name of Party  I. A legal action for Dissolutio	have lived with ress of all person Address of Marriage Making and Pa	n the following pages (City/State) or Civil Union, renting Time) v	Dersons and in the have lived with the department of the control o	e following places within the last five (Month/Year)  Time Period (Month/Year)  I, Paternity, or Allowed children iden	within the last five e years.)  Relationship to Child  cation of Parental tified in the action			
Full Name of C  B. The above-named children years: (Give name and additional states of Party  Name of Party  I. A legal action for Dissolution Responsibilities (Decision-Name of Party)	have lived with ress of all person of Marriage Making and Pa	n the following pages (City/State) or Civil Union, renting Time) v	Dersons and in the have lived with the department of the control o	e following places within the last five (Month/Year)  Time Period (Month/Year)  I, Paternity, or Allowed children iden	within the last five e years.)  Relationship to Child  ccation of Parental tified in the action w:			
Full Name of C  B. The above-named children years: (Give name and additional content of the cont	have lived with ress of all person of Marriage Making and Pa	or Civil Union, renting Time) vection has been	Dersons and in the nhave lived with (Zip Code)  Legal Separation with the above-natifiled, complete the service of the service of the complete the service of the service of the complete the service of the service of the complete of the service of the s	e following places within the last five (Month/Year)  Time Period (Month/Year)  A, Paternity, or Allowing children idente information beloe	within the last five e years.)  Relationship to Child  ccation of Parental tified in the action w:			

5. I have have not participated as a party or witness or in any other capacity in any other court proce								
		oncerning custody of, or visitation, or parenting time with the above-named children in this or any other state.						
	If so, please provide the following information County Where Case Has Been Filed	State	Case Number	Date of Hearing				
6.	i. I do do not know of any court proceedings that could affect this proceeding, including proceeding concerning enforcement of prior orders, domestic violence/abuse, protective/restraining orders, termination of parental rights, or adoption. If so, please provide the following information.							
	County Where Case Has Been Filed	State	Case Number	Nature of Proceeding				
7.	7. I do do not know of any person not a party to the proceeding who has physical custody or claims rights of parental responsibilities, legal custody, physical custody, visitation or parenting time with the above-named children. If yes, please provide the following information.							
	Name of Person	Address (Street, City, State, Zip Code)						
<ul> <li>8. I \( \subseteq \do \) do not understand that I have a continuing duty to inform the Court of any custody proceedings concerning the children in this or any other state when I obtain such information during this proceeding.</li> <li>9. I \( \subseteq \alpha \) am not a Native American Indian and these children \( \subseteq \alpha \) are \( \subseteq \alpha \) are not subject to the provisions of the</li> </ul>								
	Indian Child Welfare Act.							
☐ By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.								
	By checking this box, I am acknowledging t	hat I have m	nade a change to th	e original content of this form.				
		VERIFIC	ATION					
l d	eclare under penalty of perjury under the	law of Col	orado that the fore	going is true and correct.				
_	and the Landian Company		- 4					
EX	ecuted on the day of (date) (month)	, (year	, at ) (city or othe	r location, and state OR countr	у			
(printed name of ☐Petitioner ☐Respondent) Signature of ☐Petitioner ☐ Respondent								