

Colorado Court of Appeals 2 East 14 th Avenue, Denver, CO 80203	
Plaintiff Petitioner: _____ , & Defendant Respondent: _____ _____	▲ For Court Use ▲ <hr/> Court of Appeals Case Number: _____
My Name: _____ Full Address: _____ Phone: _____ Email: _____	District Court Case Number: _____ County: _____
Motion to/for _____	

1. Request

I would like the Court of Appeals to:

- *State exactly what action you want the Court to take.*
- *You will explain why in the next section.*

2. Reasoning

The Court should grant my request because:

3. Copies Delivered

I certify that on *(enter date)* _____, I *(check one)*

mailed | hand delivered

a copy of this document to:

Name: _____

Full Address: _____

Name: _____

Full Address: _____

4. Signature & Date

Signature: _____ Dated: _____