

Colorado Court of Appeals 2 East 14 th Avenue Denver, CO 80203	<p style="text-align: center;">▲ For Court Use ▲</p> <hr/> Court of Appeals Case Number: Enter Number
Plaintiff/Petitioner: Enter Name(s), <input type="checkbox"/> Appellant or <input type="checkbox"/> Appellee v. Defendant/Respondent: Enter Name(s) <input type="checkbox"/> Appellant or <input type="checkbox"/> Appellee	
Filing Party: Your Name Address: Enter Full Address Phone: Phone With Area Code E-Mail: E-Mail address	
Motion for Remote Appearance	

Enter Name(s) respectfully requests this case be set for remote oral arguments.

1. Please check all boxes that apply:

- Counsel for the party making the motion resides in one of the following districts: resides in the following judicial districts: 3rd, 5th, 6th, 7th, 9th, 11th, 12th, 13th, 14th, 15th, 16th, 21st, and 22nd.
- I have conferred with all opposing counsel, and all counsel agree to appear remotely.
- I have conferred with all opposing counsel, and all counsel do not agree to appear remotely.

2. Reason

If required under the Court of Appeals Interim Remote Oral Argument Policy, please state the good cause reason for setting this case on a remote orals docket:

[Enter Reasons](#)

3. Signature & Date

Signed: _____
[Print Name](#)

Dated: [Enter Date](#)

4. Certificate of Service

I certify that on [Enter Date](#) an original of this Motion was filed with the Court of Appeals and was delivered to the following:

[Enter names and method of service](#)