District Court El Paso County, Colorado	
Court Address: 270 S. Tejon Street	
Colorado Springs, CO 80903	
Re: The Matter of:	
THE PEOPLE OF THE STATE OF COLORADO	
V. *	
Defendant/e)	
Defendant(s):	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address	Case Number:
DI NI I	
Phone Number: E-mail:	B: : :
FAX Number: Atty. Reg. #:	Division Courtroom
MOTION TO	
For the following reasons: (cite any applicable law)	
<u>.</u>	
I request the Court to:	
rrequest the Court to.	
*	
Date:	
Date.	Signature of Petitioner/Plaintiff or Respondent/Defendan
	Signature of difference in the spondent/Delendan
	Address
	Addicas
	City, State and Zip Code
	Telephone Number (Home) (Work)
CERTIFIC	ATE OF SERVICE
	original of the Motion was filed with the court, and a true and
	s served on the other party(ies) by □Hand Delivery, □by
placing it in the United States mail, postage pre-paid	to:
Office of the District Attorney	
105 E Vermijo Avenue	
Colorado Springs, CO	
	□Petitioner/Plaintiff or □Respondent/Defendant