

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ Plaintiff(s)/Petitioner(s) v. Defendant(s)/Respondent(s)	▲ <b>COURT USE ONLY</b> ▲
Attorney or Party Without Attorney (Name and Address):  Phone Number:                      E-mail: FAX Number:                         Atty. Reg. #:	Case Number:  Division                      Courtroom
<b>STIPULATION</b>	

The Plaintiff/Petitioner and the Defendant/Respondent agree as follows:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_

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 that I have made a change to the original content of this form.

### SIGNATURE

\_\_\_\_\_  
Plaintiff/Petitioner Signature                      Date

\_\_\_\_\_  
Defendant/Respondent Signature                      Date

\_\_\_\_\_  
Attorney Signature, if any

\_\_\_\_\_  
Attorney Signature, if any