County Court District	Court County, Colorado	
Court Address:		
Plaintiff(s)/Petitioner(s):		
v.		
Defendant(s)/Respondent(s):		▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address):		Case Number:
Phone Number: FAX Number:	E-mail: Atty. Reg. #.:	Division Courtroom
	NT OR □OBJECT TO ASSIGUANT TO COLORADO RULE	
My name is	, (After	reading carefully, check one of the boxes below.)
☐I am a Plaintiff/Petitioner in	this case.	or a Plaintiff/Petitioner in this case.
☐I am a Defendant/Respond	ent in this case	or a Defendant/Respondent in this case.
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■(Attorneys only) i represen	t the following party of parties.	
	IMPORTANT NOT	ICE
orm. You cannot Cons Spouses/Partners in a Civil	ent or Object for another party Union cannot Consent or Object fo	e must fill out a separate Consent or Object unless you are that person's attorney or each other.
	(name of proceeding) in the	is case. I understand that if I do not consent, the and that if I do consent, I cannot withdraw my
	(name of proceeding) ir	arings and rulings on all motions or this case. I understand that if I object, the case
Date:	 Signature	3
	CERTIFICATE OF SE	RVICE
certify that on		as filed with the Court and a true and accurate
copy of the CONSENT TO AS	SSIGNMENT TO MAGISTRATE was Faxed to this number	served on the other party by:, or □by placing it in the United States
Го:		
		our signature