

COURT OF APPEALS, STATE OF COLORADO  
101 West Colfax Ave., Suite 800  
Denver, CO 80202

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\_\_\_\_\_ ,

**Petitioner** (Person/business initiating the appeal)

V.

INDUSTRIAL CLAIM APPEALS OFFICE and

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\_\_\_\_\_ ,

\_\_\_\_\_ ,

**Respondents** (List All other parties to the appeal)

Case #: \_\_\_\_\_  
(to be assigned by court)

**NOTICE OF APPEAL (C.A.R. 3.1 Workers' Compensation)**

**I. AGENCY INFORMATION**

- Agency from which judicial review is sought: Industrial Claim Appeals Office (ICAO)
- Agency case number WC: \_\_\_\_\_





### **III. PARTY AND ATTORNEY INFORMATION**

**All parties and the ICAO must be identified and a copy of this notice of appeal must be mailed to each.** You may refer to the mailing information on the last page of the ICAO Final Order to find this information. If a party was represented by an attorney, then you should identify the attorney and mail a copy of this notice of appeal to the attorney.

<b>Respondent Employer/Employee:</b>	<b>Attorney for Respondent:</b>	<b>Attorney for Respondent ICAO:</b>
		Office of the Attorney General
(name)	(name)	State Services Section
		1525 Sherman St., 7 <sup>th</sup> Floor
		Denver, CO 80203
(address)	(address)	

### **IV. APPENDIX**

**You must attach a complete copy of the ICAO Final Order, including the certificate of service (notice showing the date of mailing).**

### **V. SIGNATURE**

**You must sign this notice of appeal and provide us with your address and phone number.**

<b>Signature of Petitioner</b>	<b>Address of Petitioner</b>
By: _____ - Sign here -	
Phone #:	

**The original and five (5) copies of this Notice of Appeal must be filed with the Clerk of the Court, Colorado Court of Appeals, 101 W. Colfax Ave., Suite 800, Denver, CO 80203.**

**CERTIFICATE OF SERVICE**

**You must complete this certificate of service and mail or hand-deliver a complete copy of this notice of appeal to each party listed.**

I hereby certify that a true and correct copy of this NOTICE OF APPEAL, together with complete copies of all attachments was:

- placed in the United States mail, properly addressed, postage prepaid, or
- hand-delivered to each of the following parties on this date:

\_\_\_\_\_ (date of mailing/hand delivery)

Office of the Attorney General State Services Section 1525 Sherman St., 7 <sup>th</sup> Floor Denver, CO 80203	<u>Employer's/Employee's Attorney, if any:</u> _____ _____ _____
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By:

\_\_\_\_\_  
(Signature of Petitioner)