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| COURT OF APPEALS, STATE OF COLORADO  Ralph L. Carr Judicial Center  2 East 14th Avenue  Denver, Colorado 80203  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **,**  **Petitioner** (Person/business initiating the appeal)  V.  INDUSTRIAL CLAIM APPEALS OFFICE and  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ,  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ,  **Respondents** (List **All** other parties to the appeal) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Case #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (to be assigned by court) |
| **NOTICE OF APPEAL (C.A.R. 3.1 Unemployment Insurance)** | |

**I. AGENCY INFORMATION**

* Agency from which judicial review is sought: Industrial Claim Appeals Office
* Agency case number if **DD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**II. PROPOSED ISSUES ON APPEAL**

**Please give a *general and* *advisory* list of issues on appeal.**  You will be required to file a detailed opening brief 15 days after you receive notice that the record from the ICAO has been filed. If you need more space, attach a separate sheet.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**III. PARTY AND ATTORNEY INFORMATION**

**All** **parties and the ICAO must be identified and a copy of the 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 that party should be served through the attorney.

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| --- | --- | --- |
| **Respondent Employer/Employee:** | **Attorney for Respondent:** | **Attorney for Respondent ICAO:** |
|  |  |  |
|  |  | Office of the Attorney General |
| (name) | (name) | Ralph L. Carr Colorado Judicial Center |
|  |  | 1300 Broadway, 6th Floor |
|  |  | Denver, Colorado 80203 |
| (address) | (address) |  |

**IV. APPENDIX**

**You must attach a complete copy of the ICAO Final Order, including the certificate of service.**

**V. SIGNATURE**

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

|  |  |
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| **Signature of Petitioner** | **Address of Petitioner** |
| By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| - Sign here - |  |
| Phone #: |  |

**This Notice of Appeal must be filed with the Clerk of the Court, Colorado Court of Appeals, 2 East 14th Avenue, Denver Colorado 80203, and a copy served on all parties.**

### CERTIFICATE OF SERVICE

You must complete this certificate of service and mail or hand-deliver a complete copy of the 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:

Please check the appropriate box to the right.

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)

|  |  |
| --- | --- |
| Division of Employment & Training  U.I. Benefits  251 East 12th Avenue  Denver, CO 80203 | Employer/Employee (name & address):          AND |
| Office of the Attorney General  Human Resources Section  Ralph L. Carr Colorado Judicial Center  1300 Broadway, 6th Floor  Denver, Colorado 80203 | Employer’s/Employee’s Attorney, if any: |
|  | By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature of Petitioner) |