

County Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff(s): v. Defendant(s):	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
COMPLAINT UNDER SIMPLIFIED CIVIL PROCEDURE	

1. _____, defendant(s), is (are) resident(s) of _____ County, with a post office address of _____ Street, City _____, State of _____.
 2. The amount claimed herein does not exceed the jurisdiction of the court.
- OR**
3. The amount claimed from _____, defendant(s), is/are _____ dollars and _____ cents (\$ _____), together with proper interest, costs and any other items allocable by statute or specific agreement.

4. Such claim arises from the following event(s) or transaction(s):

The Defendant(s) is (are) is not (are not) in the military service of the United States. In support of this statement, the Plaintiff(s) set(s) forth the following facts: (State facts concerning military status of the Defendant(s), if the military status of the Defendant(s) is (are) not known, so state here.)

5. The Plaintiff(s) does (do) does (do) not demand trial by jury (if demand is made, a jury fee must be paid).
 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.

WARNING: ALL FEES ARE NON-REFUNDABLE. IN SOME CASES, A REQUEST FOR A JURY TRIAL MAY BE DENIED PURSUANT TO LAW EVEN THOUGH A JURY FEE HAS BEEN PAID.

Note: All Plaintiffs filing this complaint must sign, unless the complaint is signed by an attorney.

 Signature of Plaintiff(s) Signature of Attorney for Plaintiff(s) (if applicable)

 Address(es) of Plaintiff(s)

 Telephone Number(s) of Plaintiff(s)