County Court		County, Colorado			
Court Address:					
Plaintiff(s):					
v.					
Defendant(s):				COUR	RT USE ONLY
Attorney or Party Without Attorney (Name and Address):			Case Number:		
Phone Number:	E-mail:				
FAX Number:	Atty. Reg. #:		Divisio	n	Courtroom
ANSWER UNDER SIMPLIFIED CIVIL PROCEDURE					
(including counterclaim(s) and/or cross claim(s))					

The Defendant(s) ______(name), answer(s) the complaint as follows:

1. The amount of damages claimed to be due to the Plaintiff(s) by the complaint in this action is not due and owing for the following reasons:

OR

the Plaintiff(s) is/are not entitled to possession of the property and Defendant(s) is/are entitled to retain possession for the following reasons:

OR

the injunctive relief requested by the Plaintiff(s) should not be allowed for the following reasons:

Q(If applicable) the Defendant(s), _______
counterclaim(s) or setoff(s) against the Plaintiff(s)

_____, assert(s) the following

3.	\Box (If applicable) the Defendant(s) _	, assert(s) the following
	cross claim(s) against	, named Defendant(s) (you are limited to the
	jurisdiction of the court):	

4. If a counterclaim is asserted above, you must check one of the following statements:

The amount of the counterclaim <u>does not</u> exceed the jurisdiction of the court (County Court filing fee required).

The amount of the counterclaim <u>does</u> exceed the jurisdiction of the court, but I wish to limit my recovery to the jurisdiction of the court (County Court filing fee required).

The amount of the counterclaim <u>does</u> exceed the jurisdiction of the court, and I wish the case transferred to the District Court (District Court filing fee required)

5. The Defendant(s):

Request(s) a trial to the court.

Request(s) a jury trial. By requesting a jury trial, the Defendant(s) understand(s) that a jury fee must be paid unless the fee is waived by the Court.

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 Defendants filing this answer must sign unless the answer is signed by an attorney.

VERIFICATION

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the day of (date) (month)	,, at (year) (city or other location, and state OR country
(Printed name of Defendant(s)	Signature of Defendant(s)
Signature of Attorney for Defendant(s) (if applicable)	-
Address(es) of Defendant(s):	
Phone Number(s) of Defendant(s):	
CERT	IFICATE OF SERVICE
I certify that on (date) a true <i>PROCEDURE</i> was served on other party(s) or attorney(s) by:	e and accurate copy of this ANSWER UNDER SIMPLIFIED CIVIL the
Hand Delivery E-filed Faxed to this num	ber or Dby placing it in the United States

□Hand Delivery □E-filed □Faxed to this number ______ or □by placing it in the United States mail, postage pre-paid, and addressed to the following:

Defendant(s) or Attorney for Defendant(s) Signature