

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <input type="checkbox"/> In re the Marriage of: <input type="checkbox"/> In re the Civil Union of: <input type="checkbox"/> In the Interest of: <input type="checkbox"/> in re Parental Responsibilities concerning: _____ Petitioner: and Co-Petitioner/Respondent:	▲ <b>COURT USE ONLY</b> ▲
Attorney or Party Without Attorney (Name and Address):  Phone Number: _____                      E-mail: _____ FAX Number: _____                         Atty. Reg. #: _____	Case Number:  Division                      Courtroom
<b>CASE INFORMATION SHEET</b>	

**Full name of Petitioner:** \_\_\_\_\_

Date of birth: \_\_\_\_\_                      Social Security Number: \_\_\_\_\_

Residential address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing address (if different from residential address): \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**Full name of Co-Petitioner/Respondent:** \_\_\_\_\_

Date of birth: \_\_\_\_\_                      Social Security Number: \_\_\_\_\_

Residential address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing address (if different from residential address): \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**The following child(ren) was/were born or adopted of this marriage. (attach a second sheet, if necessary):**

Full Name of Child	Present Address	Sex	Date of Birth	Soc. Sec. No.

- The Petitioner is planning to be self-represented.
- The Co-Petitioner/Respondent is planning to be self-represented.
- Both you and the other party have retained an attorney.

Date: \_\_\_\_\_

\_\_\_\_\_  
 Petitioner or  Co-Petitioner/Respondent