

District Court _____ County, Colorado Court Address: _____ <hr/> In re the Marriage of: 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>RESPONSE TO THE PETITION FOR DECLARATION OF INVALIDITY OF MARRIAGE</b>	

The Relief requested in the Petition  should  should not be granted for the following reasons:  
 The information in the Petition is incorrect. The following information is the correct information:

\_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

I ask that the Court enter orders regarding the  status of the marriage,  best interests of the child(ren),  maintenance (spousal support)  child support,  division of property and debts,  attorney fees and costs, if appropriate,  restoration of the previous name of a party,  and any other necessary orders as follows:

\_\_\_\_\_

\_\_\_\_\_

The Respondent requests that the Court restore his/her **prior full name** to: \_\_\_\_\_

- 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.

\_\_\_\_\_

### SIGNATURE

(Printed name of Respondent)	Signature of Respondent	Date	
Attorney Signature (if any)			
Address	City	State	Zip Code
(Area Code) Home Telephone Number	(Area Code) Work Telephone Number		

### CERTIFICATE OF SERVICE

I certify that on \_\_\_\_\_ (date) a true and accurate copy of this **Response to the Petition for Declaration of Invalidity of Marriage** was served on the other party by:

- 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:

\_\_\_\_\_

\_\_\_\_\_ Your Signature