

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address:  <hr/> In re: <input type="checkbox"/> The Marriage of: <input type="checkbox"/> The Civil Union of: <input type="checkbox"/> Parental Responsibilities concerning:  <hr/> 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>PETITIONER'S VERIFIED MOTION FOR:</b> <input type="checkbox"/> PUBLICATION OF SUMMONS <input type="checkbox"/> SERVICE BY CERTIFIED MAIL <input type="checkbox"/> PUBLICATION BY CONSOLIDATED NOTICE	

The Petitioner moves for an Order to serve the Respondent by the method checked above for the following reasons:

1. Petitioner has filed: \_\_\_\_\_ (identify type of case/action).
  
2. Petitioner has been unable to locate an address for service and/or complete personal service of the Respondent despite diligent efforts, as follows:
  - Personal Service unsuccessful - documentation attached.
  - Internet search (Provide site names, dates of search, and briefly describe findings):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - Contacted family, friends, and employer. (Provide names, dates of contact and briefly describe findings):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - Other: \_\_\_\_\_  
 \_\_\_\_\_

- Respondent's known address is a post office box.
3.  Respondent's last known mailing address is as follows:

\_\_\_\_\_

4. Petitioner last saw Respondent on \_\_\_\_\_ (date), at \_\_\_\_\_  
\_\_\_\_\_ (location/place).

5.  This action involves property located in the State of Colorado, in which the Respondent has an interest.

6.  This involves issues relating to allocation of parental responsibilities (decision-making and parenting time) of minor children, in which the Respondent has an interest.

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. (Checking this box requires you to remove JDF number and copyright at the bottom of the form.)

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### VERIFICATION AND ACKNOWLEDGMENT

I swear/affirm under oath that I have read the foregoing Motion and that the statements set forth therein are true and correct to the best of my knowledge.

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

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Signature of Petitioner's Attorney

Subscribed and affirmed, or sworn to before me by \_\_\_\_\_ in the County of \_\_\_\_\_, State of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Clerk