

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> IN THE MATTER OF THE ADOPTION OF: AND CONCERNING: <div style="text-align: right;">_____, Petitioner</div>	
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg.#: _____	▲ COURT USE ONLY ▲ Case Number: _____ Division _____ Courtroom _____
OATH OR AFFIRMATION OF CONFIDENTIALITY REGARDING MOTION TO OPEN ADOPTION AND RELINQUISHMENT FILES	

I, _____, declare under oath or affirm that:

My current address is: _____
 (Street Address, City, State, Zip)

My current telephone numbers are: (Home) _____ (Work) _____

I agree, until further written notice to the Court, to accept appointment as a confidential intermediary in cases where the petitioner is seeking to find birth relatives. I state that I am not seeking appointment on behalf of a relative, friend, business associate, or other individual that could constitute a conflict of interest.

I affirm that:

1. Any information I obtain during the course of my investigation shall be kept strictly confidential and shall be used only for the purpose of arranging a contact between the individual who initiated the search and the sought-after biological relative or for release of information pursuant to §19-5-305(2)(a)(II) and (2)(c)(I), C.R.S.;
2. When a sought-after biological relative is located on behalf of the petitioner, I shall obtain consent from both parties that they wish to personally communicate with one another or for release of information pursuant to §19-5-305(2)(a)(II) and (2)(c)(I), C.R.S.;
3. Contact shall be made between the petitioner and sought-after party only when consent for such contact has been received by the Court;
4. If consent for personal communication is not obtained from both parties, all relinquishment and adoption records and any other information I obtained shall be returned to the Court and shall remain confidential, except as provided by §19-5-305(2)(a)(II) and (2)(c)(I), C.R.S.; and
5. If appointed by the Court as a confidential intermediary, I will make no unreasonable charges for my services, and will include a copy of my itemized fees and expenses in my report to the Court.

VERIFICATION AND ACKNOWLEDGEMENT

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

Executed on the _____ day of _____, _____, at _____
 (date) (month) (year) (city or other location, and state OR country)

 (printed name of Confidential Intermediary) Signature of Confidential Intermediary Date

SUBSCRIBED under oath before me on _____ in the County of _____,
 (date)

State of _____.

My commission expires: _____

 Notary Public