

_____ County District Court, Colorado Court Address: _____ _____	
Petitioner: _____ and Respondent: _____ <i>(or co-petitioner)</i>	▲ Court Use Only ▲
My Name: _____ Address: _____ _____ Phone _____ Fax: _____ Email: _____ Atty. Reg.#: _____	Case Number: _____ Division: _____ Courtroom: _____
<h2 style="margin: 0;">Response to the Petition for Invalidity of a Civil Union</h2>	

1. Response

Should the request in the Petition be granted?

Yes No*

*If no, why?

Because:

2. Facts

Were the facts mentioned in the Petition correct?

Yes No*

*If no, the correct information is:

Attach more pages as you need.

3. Indian Child Welfare Act (ICWA):

- I am aware of the child or child's relatives having American Indian/Native American or Alaska Native ancestry.

Name of tribe(s): _____

Note: If you checked that you are "aware" of the child or child's relatives having any American Indian/Native American or Alaska Native ancestry, you must complete and file with the court, JDF 1350 - ICWA Assessment Form.

- I am not aware of the child or child's relatives having any American Indian/Native American or Alaska Native ancestry.

4. My Request

I ask that the Court enter orders for/to: *Check all that apply*

- | | |
|--|--|
| <input type="checkbox"/> Status of the Civil Union | <input type="checkbox"/> Maintenance (Partner Support) |
| <input type="checkbox"/> Attorney Fees and Costs | <input type="checkbox"/> Division of Property and Debts |
| <input type="checkbox"/> Child Support | <input type="checkbox"/> Best Interest of the Child(ren) |

Restoration of my prior full name to: _____

Any other necessary orders as follows:

5. Certificate of Service

I certify that on *(enter date)* _____ a copy of this document was given to the other parties by:

Hand Delivery Colorado Courts E-Filing *(where available)*
(www.jbits.courts.state.co.us/efiling)

Email or Fax to: _____
Prior written agreement needed for this method of service.

Mail through the United States Postal Service, addressed to:

6. Verified Signature

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)

Print Your Name: _____

Your Signature: _____

Attorney Signature: _____
(If any)