|  |  |
| --- | --- |
| JDF 81 | Response to  |
| **1. Court:** [ ]  District [ ]  CountyColorado County: Mailing Address:  | *This box is for court use only.* |
| **2. Parties to the Case:**Plaintiffs/Petitioners: v.Defendants/Respondents  |
| **3. Filed by:**Name: Mailing Address: City:  St:  Zip: Phone: Email:  | **4. Case Details:**Number: Division: Courtroom:  |

# 5. Background

Do you need an interpreter? [ ]  No. [ ]  Yes, in *(language)* .

**Note** – Be sure to fill in your contact information in Box 3 above.

I submit my response to:

1) Title of document:

2) Dated:

# 6. My Response

My response is:

# 7. My Request

I request that the Court:

# 8. Certificate of Service

I certify that on *(enter date)* , I gave a copy of this document to the other parties by: *(select at least one)*

[ ]  Colorado Courts E-Filing. [*www.jbits.courts.state.co.us/efiling*](http://www.jbits.courts.state.co.us/efiling) *(not available in all cases)*

[ ]  Email or Fax to: .

[ ]  Regular Mail, addressed to: *(name, full address)* [ ]  Hand Delivery, to: *(name, place)*

1) .

2) .

3) .

# 9. Sign & Date

Print Your Name:

Signature Date