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| Colorado Court of Appeals2 East 14th AvenueDenver, CO 80203Appeal from: Insert County District CourtDistrict Court Judge: The Hon. Judge’s NameDistrict Court Case Number: Insert case NumberIn the Case of:Plaintiff/Petitioner: Enter Name(s),[ ]  Appellant or [ ]  Appellee&Defendant/Respondent: Enter Name(s)[ ]  Appellant or [ ]  AppelleeFiling Party: Your NameAddress: Street AddressCity, State Zip Code Phone: Phone With Area Code.E-Mail: E-Mail address | ⮙ FOR COURT USE ⮙\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Court of Appeals’ Case Number: Enter Court of Appeals’ Case Number  |
| **Motion for More Time to File** |

I respectfully request the Court of Appeals: (Check Option 1 or Option 2).

[ ]  Option 1: For More time to file the {Enter Tile of Document}. I am asking that the deadline be extended to {Enter Date}.

[ ]  Option 2: To accept the {Enter Tile of Document} even though it is filed late.

Explanation:

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Respectfully submitted,

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Your Name

Certificate of Service

I certify that on (Date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ an original of this Motion for More Time to File was filed with the Court of Appeals. I sent a copy, along with any attachments, to the people listed below: (Every party in the case should be sent a copy. If a party has a lawyer, send the copy to the lawyer.)

Name of Party Served: Enter Name

Sent by (Check One): [ ] U.S. Mail; OR [ ]  In-Person Hand Delivery

Address: Street Address

City, State. Zip Code

Enter the names of any other parties here, how you sent them a copy, and their address.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Your Name