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| Colorado Court of Appeals  2 East 14th Avenue  Denver, CO 80203  Appeal from:  Insert County District Court  District Court Judge: The Hon. Judge’s Name  District Court Case Number: Insert case Number  In the Case of:  Plaintiff/Petitioner: Enter Name(s),  Appellant or  Appellee  &  Defendant/Respondent: Enter Name(s)  Appellant or  Appellee  Filing Party: Your Name  Address: Street Address  City, 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