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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 |
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Respectfully submitted,

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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