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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 |
| **Notice of Change in Contact Information** |

I respectfully request the Court of Appeals to update the following contact information:

[ ]  Change of Name:

Previously Known As: Enter Former Name

Now Known As: New Name

[ ]  Change of Address:

Former Address: Street Address

City, State Zip Code

New Address: Street Address

City, State Zip Code

[ ]  Change of Phone Numbers:

Former Number: Enter Old Number

New Number: New Number

[ ]  Change of E-Mail Address:

Former E-Mail: Enter Old E-Mail

New E-Mail: New E-Mail

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Respectfully submitted,

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

 Your Name

Certificate of Service

I certify that on Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_ an original Notice of Change in Contact Information 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