

Colorado Court of Appeals 2 East 14 th Avenue Denver, CO 80203	
Petitioner: _____ & Respondent: _____	▲ FOR COURT USE ▲
My Name: _____ Street Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Email: _____	Court of Appeals Case Number: _____ District Court Case Number: _____ County: _____
<p style="text-align: center;">Motion to/for _____</p>	

1. Request

I would like the Court of Appeals to:

- *State exactly what action you want the Court to take.*
- *You will explain why in the next section.*

2. Reasoning

The Court should grant my request because:

3. Copies Delivered

I certify that on *(enter date)* _____, I *(check one)*

mailed | hand delivered

a copy of this document to:

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

4. Signature & Date

Respectfully submitted on *(dated)* _____, by

Print Name: _____ Signature: _____