JDF 1000		Case Information Sheet				
1.		Court: County: ddress:				
2.		to the Case:		This box is for court use only.		
	&	r: ent:	3.	Case Details:   Number:   Division:   Courtroom:		

## 4. Petitioner's Information

First Name:	Middle Name:				
Last Name:		Check if in Military			
Personal Pronouns Used:	he/her. 🗌 he/him. 🗌 they/their.	other:			
Date of Birth:	Social Security Nun	Security Number:			
Current Mailing Address:		Apt. #:			
City:	State:	Zip:			
Home Address: (if different from mailing address)					
Phone:	Email:				
Do you need an interpreter? 🗌 No. 🗌 Yes, in: <i>(language)</i>					

# 5. **Respondent's Information** (or co-petitioner)

First Name:	Mi	ddle Name:			
Last Name:				heck if in Military	
Personal Pronouns Used: 🗌 she/he	er. 🗌 he/him	n. 🗌 they/their.	other:		
Date of Birth:	Social Security Number:				
Current Mailing Address:				_Apt. #:	
City:		State:	Zip:		
Home Address: (if different from mailing address)					
Phone:	Email:				
Do they need an interpreter?	🗌 No.	Yes, in: <i>(langu</i>	age)		

#### 6. Children

List all children of this relationship under the age of 19:

Full Name	Current Address	Sex	Date of Birth	Social Security Number
l				a super life and a stand

Attach more pages if needed.

### 7. Verified Signature

#### Petitioner

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the (date) day of (month)	, <i>(year)</i> , at
City: (or other location),	and
State: (or country)	
Print Your Name:	
Your Signature:	
Lawyer Signature: (If any)	
Co-Petitioner (if any)	
I declare under penalty of perjury under the law of Colorado that the correct.	e foregoing is true and
Executed on the (date) day of (month)	, <i>(year)</i> , at
City: (or other location)	and

City: (or other location) \_\_\_\_\_\_, and State: (or country) \_\_\_\_\_\_. Print Your Name: \_\_\_\_\_\_ Your Signature: \_\_\_\_\_\_ Lawyer Signature: (If any) \_\_\_\_\_\_