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| <p>Court: <input type="checkbox"/> District <input type="checkbox"/> County Leenien Kapwung: <i>District</i> <i>County</i></p> <p>Colorado County: _____ <i>Colorado County:</i> _____</p> <p>Mailing Address: _____ <i>Adresin Posto:</i> _____</p> | |
| <p>Parties: Aramas lon ewe Case: Plaintiff: The People of Colorado <i>Chon Etipisi: Aramasen Colorado</i></p> <p>v. v</p> <p>Defendant: _____ <i>Chon Tipis:</i> _____</p> | <p>▲ Court Use Only ▲ <i>Aean Chon Angang Chok</i></p> |
| <p>Filed by: <i>Io a atoura ei:</i></p> <p>Name: _____ <i>It:</i> _____</p> <p>Mailing Address: _____ <i>Adresin Posto:</i> _____</p> <p>Phone _____ Fax: _____ <i>Fon</i> _____ <i>Fax:</i> _____</p> <p>Email: _____ Bar Number: _____ <i>Email:</i> _____ <i>Bar Number:</i> _____ <small>(For lawyers) (Fanniten Soualluk)</small></p> | <p>Case Number: _____ <i>Nampaan</i> <i>ewe Case:</i> _____ Division: _____ <i>Kinikin</i></p> <p>Courtroom: _____ <i>Rumw lon ewe</i> <i>Leenien Kapwung</i></p> |
| <p>Motion to Withdraw Guilty Plea <i>Mwokut le Siwili Kapasen Tipeu</i></p> | |

I ask the court to set aside my guilty plea under C.R.S. § 18-1-410.6. I affirm that:

Ua tingor ewe leenien kapwung an epwe siwili ai kapasen tipeu pwe ua fori och tipis, alon C.R.S. § 18-1-410.6. Ua affatta pwe:

1. Basic Qualifications
Pworousen Pwata a Fichituk

- a) I am not a citizen of the United States of America.
Ngang usap emon wiliposun ewe United States of America.
- b) I plead guilty to a qualifying misdemeanor or municipal offense in this case. C.R.S. § 18-1-410.6(3)(a).
Ua eani kapasen tipeu usun och tipis ese chou (misdemeanor) are tipis mi u ngeni allukun telinimw (municipal offense) lon ei case. C.R.S. § 18-1-410.6(3)(a).

- c) The crime for which I plead guilty occurred before March 1, 2022.

Ewe tipis ua tipeu pwe ua fori, a fis mwen March 1, 2022.

2. Adverse Immigration Consequences

Feiengaw ngeni Immigration

I am or will suffer the following adverse immigration consequences because of my guilty plea:
Feiengaw mi pop seni ai kapasen tipeu pwe ua fori och tipis epwe aweiresi ai immigration lon ekkewe napanap mi mak fan:

3. Grounds

Minne a Longolong Woon

My guilty plea was obtained in violation of the constitution or laws of Colorado or the United States of America, because: (*Check all that apply*)

Ese pwung ewe napanapen an emon angei ai kapasen tipeu pwe ua fori och tipis pokiten a u ngeni ekkewe allukun Colorado are ewe United States of America, ren: (Fili meinisin mi weneiti)

I was not adequately advised of the adverse immigration consequences by my lawyer.

Nei we soualluk ese unuseñ aweweochu ngeniei met mwiriloon ai kapas tipeu woon immigration.

I waived my right to a lawyer without being advised by the Court that a lawyer could counsel me on potential adverse immigration consequences of my guilty plea.

Use etiwa allilisin emon soualluk nge ewe Leenien Kapwung ese affata ngeniei ifa usun ewe soualluk a tongeni menlapei ngeniei ikkeffa feiengaw a tongeni fis ngeni ai immigration pokiten ai kapas tipeu pwe ua fori och tipis.

The guilty plea was constitutionally infirm under C.R.S. § 18-1-410(1)(a) to (1)(d), because:

Ai kapasen tipeu ese fiti allukun ewe constitution ren C.R.S. § 18-1-410(1)(a) to (1)(d), pokiten:

4. Certificate of Service
Taropween Kawor

I certify that on *(enter date)* _____, I gave a copy of this document to the prosecuting attorney by: *(select at least one)*

Ua anneta pwe lon (pwinin maram) _____, *echo kapiin ei taropwe a kawor ngeni ewe soualluk mi etipisi: (filii eu)*

- Hand Delivery Colorado Courts E-Filing *(only lawyers may use this method)*
Pwisin Uweialo *Leenien Kapwungun Colorado E-Filing (only lawyers may use this method)*
 Regular Mail, addressed to: *(name, full mailing address)*
Lon Posto, ngeni ei adres: (it, unuseen adresin posto)
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5. Verified Signature
Sain

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

Ua pwonei pwe meinisin mi mak asan a pwung me wenechar pun ua silei pwe alon allukun Colorado mi wor chappan ar fofoor ngeniir mi eani kapas chofona lon mettochun pekin alluk.

Executed on the _____ day of _____, _____, at
Ei tingor a pop *pwinin* _____, _____, *me*
(date) *(month)* *(year)*
(pwinin) *(maram)* *(ier)*

_____, _____.
(city or other location, *and state or country)*
(telenimw are pwal eu leeni, *me state are mwu)*

Print Your Name: _____
Mak Itom: _____

Your Signature: _____
Kopwe Sain: _____

Lawyer Signature: _____
Ewe Soualluk epwe Sain: _____
(If any)
(Ika mi wor)