

<b>Court:</b> <input type="checkbox"/> District <input type="checkbox"/> Juvenile Colorado County: _____ Court Address: _____	▲ <i>Court Use Only</i> ▲
<b>Parties:</b> Petitioner: The People of the State of Colorado In the Interest of: _____ & Respondents: _____	
<b>Filed by:</b> Name: _____ Address: _____ Phone: _____ Fax: _____ Email: _____ Bar Number: _____ <small>(For lawyers)</small>	Case Number: _____ Division: _____ Courtroom: _____
<b>Motion to Have a Firearm</b>	

I request a determination that the C.R.S. § 18-12-108(3)(a) prohibition against firearms does not apply to me.

**1. My Contact Info**

Please update my contact information to that in the "Filed by:" section above.

Please update my contact information to:

Full Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**2. Grounds**

I make this request pursuant to C.R.S. § 18-12-108(3)(b).

**3. Qualifications**

a) I have completed my sentence.

b) I have good cause for possessing, using, or carrying a firearm because:

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**4. Certificate of Service**

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

- Hand Delivery       Colorado Courts E-Filing *(lawyers only)*
- Email or Fax to: \_\_\_\_\_
- Regular Mail, addressed to: *(name, full mailing address)*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Verified Signature**

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

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at  
*(date)*                      *(month)*                      *(year)*  
\_\_\_\_\_,                      \_\_\_\_\_  
*(city or other location,*                      *and state or country)*

Print Your Name: \_\_\_\_\_

Your Signature: \_\_\_\_\_

Lawyer Signature: \_\_\_\_\_  
*(if any)*