☐ District Court ☐ County Court				
Court Address:				
Plaintiff:				
and Defendant:				
Dolonaum.			COURT USE ONLY	
Attorney (Name and Address):			Case Numb	er:
Phone Number: E-ma FAX Number: Atty. F	il: Reg. #:		Division	Courtroom
CONSENT TO UNDER C.R.C.P. 11	LIMITED APPEA			
I,a limited entry of appearance	, (Pro se p		hereby cor	nsent to granting for
permission to represent me fo	•	,		
I understand that the Court recase. That at the conclusion Court and the other parties into be served; that I have the obtrial; and that failure or refusal and that the dates of any pronot be affected by the comple	of this limited app formed where later ligation to prepare to meet these bur ceedings including	earance I have notices, plead for trial or have dens may sub trial and hold	e the burder dings, and o we other cou ject me to a ing of such	n of keeping the ther papers may insel prepare for possible default
Service of process may be semy address which is				st to this case at 
DATE:				
DATE:		Signature		
	Name: Address:			
	Telephone:			