Small Claims Court County Court District Court of County, Colorado		
Court Address:		
Plaintiff(s)/Petitioner(s):		
and		
Defendant(s)/Respondent(s):	▲ COURT USE ONLY ▲	
Attorney or Party Without Attorney (Name and Address):	Case Number:	
Phone Number: E-mail:		
FAX Number: Atty. Reg. #:  MOTION FOR ENTRY OF JUDGMENT ON	Division Courtroom	
MICTION FOR ENTRY OF SUDGMENT ON	STIFULATION	
<ol> <li>I request the Court please take notice that (name of party) has failed to comply with the terms of the Stipulation which was made an Order of the Court on (date) in the above captioned case.</li> </ol>		
2. That party failed to comply with the following term(s) of the Stipulation	:	
3. Complete this section only if the Stipulation contains these term	s:	
As required by the terms of the Stipulation, prior to filing this Moti notice of his/her failure to comply with the Stipulation, and I have give compliance with the Stipulation.		
☐ This notice was provided to the other party on(date) and a copy of the notice is attached with this Motion. The other party has continued his/her failure to comply despite receiving this notice.		
4. I am asking the Court to:		
In a money case: Enter judgment against the other party in the to balance due). This amount reflects the agreed upon amount in the including interest, attorney fees, other costs, etc. (if applicable) less	e Stipulation of \$	
Please provide the applicable information below as to the total balance due:		
Principal:	\$	
Interest:	\$	
Court Costs and Service Fees:	\$	

Attorney Fees:	\$	
Other (describe):	\$	
TOTAL BALANCE DUE:	\$	
In an eviction case: Enter a judgment case. The property is located at:	for possession of the real property which i	s the subject of this
☐ By checking this box, I am acknowledging I a form.	am filling in the blanks and not changing a	anything else on the
☐ By checking this box, I am acknowledging th	at I have made a change to the original co	ontent of this form.
	Signature	Date
	Address	
	City, State, Zip Code	
	(Area Code) Home Telephone N	lumber
	(Area Code) Work Telephone No	umber
CERTI	FICATE OF SERVICE	
I certify that on (date) JUDGMENT ON STIPULATION was served on	a true and accurate copy of this MO the other party by:	TION FOR ENTRY OF
☐ Hand Delivery ☐ E-filed ☐ Faxed to this nu States mail, postage pre-paid, and addressed to		placing it in the United
	Signature	