

JDF 1338	Appointee's Mandatory Disclosure	
1. Court: <input type="checkbox"/> District <input type="checkbox"/> Juvenile Colorado County: _____ Mailing Address: _____		<i>This box is for court use only.</i>
2. Parties to the Case: Petitioner: _____ & Respondent: _____ <small>(or Co-petitioner)</small>		
3. Filed by: Name: _____ Mailing Address: _____ City: _____ St: _____ Zip: _____ Phone: _____ Email: _____		4. Case Details: Number: _____ Division: _____ Courtroom: _____

5. Appointment Type

I was appointed as: *(check all that apply)*

- Child's Legal Representative. C.R.S. § 14-10-116.
- Child and Family Investigator. C.R.S. § 14-10-116.5.
- Mental Health Professional. C.R.S. § 14-10-127.
- Parenting Coordinator. C.R.S. § 14-10-128.1.
- Decision Maker. C.R.S. § 14-10-128.3.

6. Process

- 1) Within 7 days of appointment, the appointee files and serves this disclosure form.
- 2) Within 7 days of that disclosure, the parties may object to the appointment based on information in the disclosure.
- 3) Within 7 days of an objection, the Court will make a new appointment, or confirm the existing appointment
- 4) If no one files a timely objection, the appointment is deemed confirmed.

7. Disclosures

1) Do you have, or have you had a familial, financial, or social relationship with the child, either party, the attorneys of record, or the Judicial Officer? *(check one)*

Yes. * No.

*** If yes**, answer questions 1a and 1b below:

1a) Explain the nature of the relationship:

1b) Does the relationship that is explained above represent a conflict of interest or appearance of impropriety in your opinion?

Yes. **No.** *

*** If no**, please explain:

8. Certificate of Service

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

- Colorado Courts E-Filing. www.jbits.courts.state.co.us/efiling
- Email or Fax to: _____.
- Regular Mail, addressed to: *(name, full address)* Hand Delivery, to: *(name, place)*
 - 1) _____.
 - 2) _____.
 - 3) _____.

9. Sign & Date

Print Your Name: _____

Signature: _____

Date: _____