

RULE CHANGE 2017(01)

COLORADO RULES OF CIVIL PROCEDURE

**Rule 33 and Form 20
Rules 103, 403, and Forms
Effective March 1, 2017**

**Rule 17
Rule 41
Rule 60
Rule 121 §§ 1-14, 1-19, 1-23, and 1-26
Rule 305.5
Rule 122
JDF 1111
Effective Immediately**

Rule 33. Interrogatories to Parties

(a) [NO CHANGE]

(b) Answers and Objections.

(1) Each interrogatory shall be answered separately and fully, in writing and under oath, unless it is objected to, in which event the objecting party shall state the reasons for objection and shall answer under oath to the extent the interrogatory is not objectionable. An objection must state with specificity the grounds for objection to the interrogatory and must also state whether any responsive information is being withheld on the basis of that objection. A timely objection to an interrogatory stays the obligation to answer those portions of the interrogatory objected to until the court resolves the objection. No separate motion for protective order under ~~pursuant to~~ C.R.C.P. 26(c) is required.

(2) – (5) [NO CHANGE]

(c) – (d) [NO CHANGE]

(e) Pattern and Non-Pattern Interrogatories; Limitations. The pattern interrogatories set forth in the Appendix to Chapters 1 to 17A⁴, Form 20, are approved. Any pattern interrogatory and its subparts shall be counted as one interrogatory. Any discrete subparts ~~to~~in a non-pattern interrogatory shall be considered as a separate interrogatory.

COMMENTS

1995 [NO CHANGE]

2017

[1] Pattern interrogatories [Form 20, pursuant to C.R.C.P. 33(e)] have been modified to more appropriately conform to the 2015 amendments to C.R.C.P. 16, 26, and 33. A change to or deletion of a pre-2017 pattern interrogatory should not be construed as making that former interrogatory improper, but instead, only that the particular interrogatory is, as of the effective date of the 2017 rule change, modified as stated or no longer a “pattern interrogatory.”

[2] The change to C.R.C.P. 33(e) is made to conform to the holding of *Leafner v. Zarlengo*, 44 P.3d 1072 (Colo. 2002).

☐ County Court ☐ District Court [See §2(a)]

_____ County, Colorado

Court Address:

Plaintiff(s):

v.

Defendant(s):

COURT USE ONLY

Attorney or Party Without Attorney (Name and Address):

Case Number:

Phone Number:

E-mail:

FAX Number:

Atty. Reg. #:

Division:

Courtroom:

PATTERN INTERROGATORIES UNDER RULE 33

The following Pattern Interrogatories are propounded to:

[Insert name of party] pursuant to C.R.C.P. 16(b)(11)(a)(1)(IV), 26, and 33(e).

Section 1. General Instructions ~~to All Parties~~

(a) These pattern interrogatories and instructions do not change existing Rules or other law relating to interrogatories.- These are general instructions. For time limitations, requirements for service on other parties, and other details, *see* C.R.C.P. 16(b)(11)(IV), 26, 33, 121 § 1-12, and the cases construing those Rules.

(b) These pattern interrogatories and instructions do not ~~These interrogatories do not change existing law relating to interrogatories nor do they~~ affect an answering party's right to assert any privilege or objection. Parties may object to these pattern interrogatories on grounds including, but not limited to, that the interrogatories exceed the scope of permissible discovery as defined in C.R.C.P. 26(b)(1) because the inquiry is not relevant to the claims and defenses of any party or is not proportional to the needs of the case.

Section 2. Instructions to the Asking Party

(a) These interrogatories are ~~intended~~ designed for optional use in district courts only. They are approved sample discovery requests but are not intended to be used in every case.

(b) Parties should carefully consider the claims and defenses at issue to determine whether these pattern interrogatories are applicable to their particular action. Parties also should carefully consider whether these pattern interrogatories are proportional to the discovery needs of their particular case.

(c) Parties are strongly encouraged to consider whether the information sought through these pattern interrogatories would be better obtained through requests for the production of documents containing the information sought. As one example, the objective of an interrogatory asking for information relating to a party's medical treatment might more efficiently be achieved by asking for the party's medical records in a request for production.

(d) C.R.C.P. 26(a)(1)(C) requires production of specific information relating to the categories and amounts of a party's claimed damages. As a result, interrogatories requesting information relating to claimed damages may not be necessary, or may be tailored to particular topics relating to a party's claimed damages.

~~(e)~~ Check the box next to each interrogatory that you want the answering party to answer. Use care in choosing those interrogatories that are applicable to the case. Each checked box counts as one interrogatory for purposes of C.R.C.P. 26(b)(2)(B) and case management orders.

~~(f)~~ The interrogatories in section 16.0, Defendant's Contentions—Personal Injury, should not be used until the defendant has had a reasonable opportunity to conduct an investigation or discovery of plaintiff's injuries and damages.

~~(g)~~ Subject to the limitations in C.R.C.P. 16(b)(~~11~~)(~~IV~~) and 33, additional, non-pattern interrogatories may be included~~attached~~.

Section 3. Instructions to the Answering Party

(a) An answer or other appropriate response must be given to each interrogatory checked by the asking party.

(b) As a general rule, within ~~30~~35 days after you are served with these interrogatories, you must serve your responses on the asking party and serve copies of your responses on all other parties to the action who have appeared. See C.R.C.P. 33 for details.

(c) Each answer must be as complete and straightforward as the information reasonably available to you permits. If an interrogatory cannot be answered completely, answer it to the extent possible.

(d) If you do not have enough personal knowledge to fully answer an interrogatory, say so, but make a reasonable and good faith effort to get the information by asking other persons or organizations, unless the information is equally available to the asking party.

(e) Whenever an interrogatory may be answered by referring to a document, the document may be attached as an exhibit to the response and referred to in the response. If the document has more than one page, refer to the page and section where the answer to the interrogatory can be found. In addition, C.R.C.P. 33(d) permits an answering party to identify and make available business records in lieu of responding to a particular interrogatory.

(f) Whenever an address and telephone number for the same person are requested in more than one interrogatory, you are required to furnish them in answering only the first interrogatory asking for that information.

(g) Your answers to these interrogatories must be verified, dated, and signed. You may ~~wish to~~ use the following form at the end of your answers: "I declare under penalty of perjury under the laws of the State of Colorado that the foregoing answers are true and correct to the best of my knowledge, information and belief."

(DATE)_____ (SIGNATURE)_____

Section 4. Definitions

Words in **BOLDFACE CAPITALS** in these interrogatories are defined as follows:

(a) **INCIDENT** includes the circumstances and events surrounding the alleged accident, injury, or other occurrence or breach of contract giving rise to this action or proceeding.

(b) **YOU OR ANYONE ACTING ON YOUR BEHALF** includes you, your agents, your employees, your insurance companies, their agents, their employees, your attorneys, your accountants, your investigators, and anyone else acting on your behalf.

(c) **PERSON OR ENTITY** includes a natural person, ~~firm, association, and any~~ organization other than a natural person., ~~partnership, business, trust, corporation, or public entity.~~

(d) **DOCUMENT** means a writing, as defined in CRE 1001, and includes the original or a copy of a handwriting, a typewriting, printing, ~~Photostatting~~ photocopying, a photographing, electronically stored information (including emails), and every other means of recording upon any tangible thing and any form of communicating or representation, including letters, words, pictures, sounds, or symbols, or combinations of them.

(e) **HEALTH CARE PROVIDER** includes any **PERSON OR ENTITY** ~~or entity~~ referred to as a "Health Care Institution~~Professional~~" or "Health Care Professional~~Institution~~" in C.R.S. § 13-64-202(3) and (4).

(f) **ADDRESS** means the street address, including the city, state, and zip code.

Section 5. Interrogatories

The following interrogatories have been approved by the Colorado Supreme Court under C.R.C.P. 16(b)(1)(~~IV~~), 26, and 33(e). The pattern interrogatories have been modified to more appropriately conform to the 2015 amendments to C.R.C.P. 16, 26, and 33. A change to or deletion of a pre-2017 pattern interrogatory should not be construed as making that former interrogatory improper, but instead, only that the particular interrogatory is, as of the effective date of the 2017 rule change, modified as stated or is no longer a “pattern interrogatory.”

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1.0 Identity of Persons Answering These Interrogatories

- ☐ 1.1 State the name, **ADDRESS**, telephone number, and relationship to you of each person who prepared or assisted in the preparation of the responses to these interrogatories. (Do not identify anyone who simply typed or reproduced the responses.)

2.0 General Background Information Individual

- ☐ 2.1 State:

- (a) your name;
- (b) every name you have used in the past;
- (c) the dates you used each name;

~~++ 2.2~~ (d) ~~State~~ the date and place of your birth.

- ☐ 2.23 At the time of the **INCIDENT**, did you have a driver's license or any other permit or license for the operation of a motor vehicle?

If so, state:

- (a) the state or other issuing entity;
- (b) the license number and type;
- (c) the date of issuance;
- (d) all restrictions.

~~++ 2.4~~ ~~At the time of the **INCIDENT**, did you have any other permit or license for the operation of a motor vehicle?~~

~~If so, state:~~

- ~~(a) the state or other issuing entity;~~
- ~~(b) the license number and type;~~
- ~~(c) the date of issuance;~~
- ~~(d) all restrictions.~~

- ☐ 2.35 State:

- (a) your present residence **ADDRESS**;
- (b) your residence **ADDRESSES** for the last five years;
- (c) the dates you lived at each **ADDRESS**.

- ☐ 2.46 State:

- (a) the name, **ADDRESS**, and telephone number of your present employer or place of self-employment;
- (b) the name, **ADDRESS**, dates of employment, job title, and nature of work for each employer or self-employment you have had from five years before the **INCIDENT** until today.

- ☐ 2.57 State:

- (a) the name and **ADDRESS** of each school or other academic or vocational institution you have attended beginning with high school;
- (b) the dates you attended;
- (c) the highest grade level you have completed;

(d) the degrees received.

☐ 2.68 Have you ever been convicted of a felony?

If so, for each conviction state:

- (a) the city and state where you were convicted;
- (b) the date of conviction;
- (c) the offense;
- (d) the court and case number.

☐ 2.79 Can you:

(a) speak ~~or~~ English with ease?

(b) read English with ease? ~~and~~

(c) write English with ease?

If the answer to any of sub-interrogatories 2.7 (a), (b) or (c) is "no," ~~not~~, what language and dialect do you normally use?

~~[-] 2.10 Can you read and write English with ease?~~

~~If not, what language and dialect do you normally use?~~

☐ 2.811 At the time of the **INCIDENT**, were you acting as an agent or employee for any **PERSON OR ENTITY**?

If so, state:

- (a) the name, **ADDRESS**, and telephone number of that **PERSON OR ENTITY**;
- (b) a description of your duties.

☐ 2.912 At the time of the **INCIDENT**, did you or any other person have any physical, emotional, or mental disability or condition that may have contributed to the occurrence of the **INCIDENT**?

If so, for each person state:

- (a) the name, **ADDRESS**, and telephone number;
- (b) the nature of the disability or condition;
- (c) the manner in which the disability or condition contributed to the occurrence of the **INCIDENT**.

~~[-] 2.13 Within 24 hours before the **INCIDENT**, did you or any person involved in the **INCIDENT** use or take any of the following substances: alcoholic beverage, marijuana, or other drug or medication of any kind (prescription or not)?~~

~~If so, for each person state:~~

- ~~(a) the name, **ADDRESS**, and telephone number;~~
- ~~(b) the nature or description of each substance;~~
- ~~(c) the quantity of each substance used or taken;~~
- ~~(d) the date and time of day when each substance was used or taken;~~
- ~~(e) the **ADDRESS** where each substance was used or taken;~~
- ~~(f) the name, **ADDRESS**, and telephone number of each person who was present when each substance was used or taken;~~

- (g) the name, **ADDRESS**, and telephone number of any **HEALTH CARE PROVIDER** that prescribed or furnished the substance and the condition for which it was prescribed or furnished.

3.0 General Background Information ~~---~~ **Business Entity**

☐ 3.1

Are you an entity? If so, state:

- (a) the type of entity you are;
- (b) the date and place where you were formed;
- (c) your current name;
- (d) all names under which you have operated within the last ten years, and the dates each name was used;
- (e) the **ADDRESS** of your principal place of business.

Are you a corporation?

If you are a corporationso, state:

- (a) ~~the name stated in the current articles of incorporation;~~
- (b) ~~all other names used by the corporation during the past ten years and the dates each was used;~~
- (c) ~~the date and place of incorporation;~~
- (d) ~~the **ADDRESS** of the corporation's principal place of business;~~
- (e) ~~whether you are qualified to do business in Colorado.~~

☒ 3.2

Are you a partnership?

If you are a partnershipso, state:

- (a) ~~the current partnership name;~~
- (b) ~~all other names used by the partnership during the past ten years and the dates each was used;~~
- (c) ~~whether you are a limited partnership and, if so, under the laws of what jurisdiction;~~
- (d) ~~the name and **ADDRESS** of each general partner;~~
- (e) ~~the **ADDRESS** of the partnership's principal place of business.~~

☒ 3.3

Are you a joint venture?

If you are a joint ventureso, state:

- (a) ~~the current joint venture name;~~
- (b) ~~all other names used by the joint venture during the past ten years and the dates each was used;~~
- (c) ~~the name and **ADDRESS** of each joint venturer;~~
- (d) ~~the **ADDRESS** of the joint venturer's principal place of business.~~

☒ 3.4

Are you an unincorporated association?

If you are an unincorporated associationso, state:

- (a) ~~the current unincorporated association's name;~~
- (b) ~~all other names used by the unincorporated association during the past ten years and the dates each was used;~~

~~(e) the ADDRESS of the association's principal place of business.~~

☐ 3.25 Have you done business under a fictitious name during the past ten years?

If so, for each fictitious name state:

- (a) the name;
- (b) the dates the name was used;
- (c) the state and county of each fictitious name filing;
- (d) the ADDRESS of your principal place of business.

☐ 3.36 Within the past five years, has any public entity registered or licensed your businesses?

If so, for each license or registration:

- (a) identify the license or registration;
- (b) state the name of the public entity;
- (c) state the dates of issuance and expiration.

☐ 3.4 State the name, ADDRESS, and the job title of the manager or managers most responsible for overseeing the INCIDENT or events leading to the INCIDENT.

4.0 Insurance *(Withdrawn. See C.R.C.P. 26(a)(1)(D), and 2017 Comment to C.R.C.P. 33.)*

~~☐ 4.1 At the time of the INCIDENT, was there in effect any policy of insurance through which you were or might be insured in any manner (for example, primary, pro rata, or excess liability coverage or medical expense coverage) for the damages, claims, or actions that have arisen out of the INCIDENT?~~

~~If so, for each policy state:~~

~~the kind of coverage;~~

~~the name and ADDRESS of the insurance company;~~

~~the name, ADDRESS, and telephone number of each named insured;~~

~~the policy number;~~

~~the limits of coverage for each type of coverage contained in the policy;~~

~~whether any reservation of rights or controversy or coverage dispute exists between you and the insurance company;~~

~~the name, ADDRESS, and telephone number of the custodian of the policy.~~

~~☐ 4.2 Are you self-insured under any statute for the damages, claims, or actions that have arisen out of the INCIDENT?~~

~~If so, specify the statute.~~

5.0 (Reserved)

6.0 Physical, Mental, or Emotional Injuries

☐ 6.1 Do you attribute any physical, mental, or emotional injuries to the INCIDENT?

If your answer is "no," do not answer interrogatories 6.2 through 6.7.

☐ 6.2 Identify each injury you attribute to the INCIDENT and the area of your body affected.

- ☐ 6.3 Do you still have any complaints that you attribute to the **INCIDENT**?
If so, for each complaint state:
- (a) a description;
 - (b) whether the complaint is subsiding, remaining the same, or becoming worse;
 - (c) the frequency and duration.
- ☐ 6.4 Did you receive any consultation or examination (except from expert witnesses covered by C.R.C.P. 35) or treatment from a **HEALTH CARE PROVIDER** for any injury you attribute to the **INCIDENT**?
If so, for each **HEALTH CARE PROVIDER** state:
- (a) the name, **ADDRESS**, and telephone number;
 - (b) the type of consultation, examination, or treatment provided;
 - (c) the dates you received consultation, examination, or treatment;
 - (d) the charges to date.
- ☐ 6.5 Have you taken any medication, prescribed or not, as a result of injuries that you attribute to the **INCIDENT**?
If so, for each medication state:
- (a) the name;
 - (b) the **PERSON OR ENTITY** who prescribed or furnished it;
 - (c) the date prescribed or furnished;
 - (d) the dates you began and stopped taking it;
 - (e) the cost to date.
- ☐ 6.6 Are there any other medical services not previously listed (for example, ambulance, nursing, prosthetics)?
If so, for each service state:
- (a) the nature;
 - (b) the date;
 - (c) the cost;
 - (d) the name, **ADDRESS**, and telephone number of each provider.
- ☐ 6.7 Has any **HEALTH CARE PROVIDER** advised that you may require future or additional treatment for any injuries that you attribute to the **INCIDENT**?
If so, for each injury state:
- (a) the name and **ADDRESS** of each **HEALTH CARE PROVIDER**;
 - (b) the complaints for which the treatment was advised;
 - (c) the nature, duration, and estimated cost of the treatment.

7.0 Property Damage

- ☐ 7.1 Do you attribute any loss of or damage to a vehicle or other property to the **INCIDENT**?
If so, for each item of property:
- (a) describe the property;

- (b) describe the nature and location of the damage to the property;
- (c) state the amount of damage you are claiming for each item of property and how the amount was calculated;
- (d) if the property was sold, state the name, **ADDRESS**, and telephone number of the seller, the date of sale, and the sale price.

☐ 7.2 Has a written estimate or evaluation been made for any item of property referred to in your answer to interrogatory 7.1?

If so, for each estimate or evaluation state:

- (a) the name, **ADDRESS**, and telephone number of the **PERSON** OR ENTITY who prepared it and the date prepared;
- (b) the name, **ADDRESS**, and telephone number of each **PERSON** OR ENTITY who has a copy;
- (c) the amount of damage stated.

☐ 7.3 Has any item of property referred to in your answer to interrogatory 7.1 been repaired?

If so, for each item state:

- (a) the date repaired;
- (b) a description of the repair;
- (c) the repair cost;
- (d) the name, **ADDRESS**, and telephone number of the **PERSON** OR ENTITY who repaired it;
- (e) the name, **ADDRESS**, and telephone number of the **PERSON** OR ENTITY who paid for the repair.

8.0 Loss of Income or Earning Capacity

~~☐ 8.1 Do you attribute any loss of income or earning capacity to the **INCIDENT**? If your answer is "no," do not answer interrogatories 8.2 through 8.8.~~

☐ 8.12 State:

- (a) the nature of your work;
- (b) your job title at the time of the **INCIDENT**;
- (c) the date your employment began.

☐ 8.23 State the last date before the **INCIDENT** that you worked for compensation.

☐ 8.34 State your monthly income at the time of the **INCIDENT** and how the amount was calculated.

☐ 8.45 State the date you returned to work at each place of employment following the **INCIDENT**.

☐ 8.56 State the dates you did not work and for which you lost income.

☐ 8.68 Will you lose income in the future as a result of the **INCIDENT**?

If so, state:

- (a) the facts upon which you base this contention;
- (b) an estimate of the amount;

- (c) an estimate of how long you will be unable to work;
- (d) how the claim for future income is calculated.

8.7 *(Pattern interrogatory 8.7 was withdrawn. See C.R.C.P. 26(a)(1)(C), and 2017 comment to C.R.C.P. 33.)* ~~State the total income you have lost to date as a result of the INCIDENT and how the amount was calculated.~~

9.0 Other Damages

☐ 9.1 Are there any other damages that you attribute to the **INCIDENT**?

If so, for each item of damage state:

- (a) the nature;
- (b) the date it occurred;
- (c) the amount;
- (d) the name, **ADDRESS**, and telephone number of each **PERSON** OR ENTITY to whom an obligation was incurred.

☐ 9.2 Do any **DOCUMENTS** support the existence or amount of any item of damages claimed in interrogatory 9.1?

If so, state the name, **ADDRESS**, and telephone number of the **PERSON** OR ENTITY who has each **DOCUMENT**.

10.0 Medical History

☐ 10.1 At any time before the **INCIDENT**, did you have complaints or injuries that involved the same part of your body claimed to have been injured in the **INCIDENT**?

If so, for each state:

- (a) a description;
- (b) the dates it began and ended;
- (c) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** whom you consulted or who examined or treated you.

10.2 *(Pattern interrogatory 10.2 was withdrawn. See 2017 Comment to C.R.C.P. 33.)* ~~List all physical, mental, and emotional disabilities you had immediately before the INCIDENT. (You may omit mental or emotional disabilities unless you attribute any mental or emotional injury to the INCIDENT.)~~

☐ 10.3 At any time after the **INCIDENT**, did you sustain injuries of the kind for which you are now claiming damages?

If so, for each incident state:

- (a) the date and the place it occurred;
- (b) the name, **ADDRESS**, and telephone number of any other **PERSON** OR ENTITY involved;
- (c) the nature of any injuries you sustained;
- (d) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** that you consulted or who examined or treated you;
- (e) the nature of the treatment and its duration.

11.0 Other Claims and Previous Claims *(Withdrawn. See C.R.C.P. 26(b)(1), and 2017 Comment to C.R.C.P. 33.)*

~~☐ 11.1~~ Except for this action, in the last ten years have you filed an action or made a written claim or demand for compensation for personal injuries?

~~If so, for each action, claim, or demand state:~~

- ~~(a) the date, time, and place and location of the **INCIDENT** (closest street **ADDRESS** or intersection);~~
- ~~(b) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** against whom the claim was made or action filed;~~
- ~~(c) the court, names of the parties, and case number of any action filed;~~
- ~~(d) the name, **ADDRESS**, and telephone number of any attorney representing you;~~
- ~~(e) whether the claim or action has been resolved or is pending.~~

~~☐ 11.2~~ In the last ten years have you made a written claim or demand for workers' compensation benefits?

~~If so, for each claim or demand state:~~

- ~~(a) the date, time, and place of the **INCIDENT** giving rise to the claim;~~
- ~~(b) the name, **ADDRESS**, and telephone number of your employer at the time of the injury;~~
- ~~(c) the name, **ADDRESS**, and telephone number of the workers' compensation insurer and the claim number;~~
- ~~(d) the period of time during which you received workers' compensation benefits;~~
- ~~(e) a description of the injury;~~
- ~~(f) the name, **ADDRESS**, and telephone number of any **HEALTH CARE PROVIDER** that provided services;~~
- ~~(g) the case number of the workers' compensation claim.~~

12.0 Investigation ~~General~~

☐ 12.1 State the name, **ADDRESS**, and telephone number of each individual:

- (a) who witnessed the **INCIDENT** or the events occurring immediately before or after the **INCIDENT**;
- (b) who made any statement at the scene of the **INCIDENT**;
- (c) who heard any statements made about the **INCIDENT** by any individual at the scene;
- (d) who **YOU OR ANYONE ACTING ON YOUR BEHALF** claims to have knowledge of the **INCIDENT** (except for expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4)).

☐ 12.2 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** interviewed any individual concerning the **INCIDENT**?

If so, for each individual state:

- (a) the name, **ADDRESS**, and telephone number of the individual interviewed;
- (b) the date of the interview;
- (c) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who conducted the interview.

- ☐ 12.3 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** obtained a written or recorded statement from any individual concerning the **INCIDENT**?

If so, for each statement state:

- (a) the name, **ADDRESS**, and telephone number of the individual from whom the statement was obtained;
- (b) the name, **ADDRESS**, and telephone number of the individual who obtained the statement;
- (c) the date the statement was obtained;
- (d) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the original statement or a copy.

- ☐ 12.4 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** know of any photographs, films, or videotapes depicting any place, object, or individual concerning the **INCIDENT** or plaintiff's injuries?

If so, state:

- (a) the number of photographs or feet of film or videotape;
- (b) the places, objects, or persons photographed, filmed, or videotaped;
- (c) the date the photographs, films, or videotapes were taken;
- (d) the name, **ADDRESS**, and telephone number of the individual taking the photographs, films, or videotapes;
- (e) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the original or a copy.

- ☐ 12.5 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** know of any diagram, reproduction, or model of any place or thing (except for items developed by expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4)) concerning the **INCIDENT**?

If so, for each item state:

- (a) the type (i.e., diagram, reproduction, or model);
- (b) the subject matter;
- (c) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has it.

- ☐ 12.6 Was a report made by any **PERSON OR ENTITY** concerning the **INCIDENT**?

If so, state:

- (a) the name, title, identification number, and employer of the **PERSON OR ENTITY** who made the report;
- (b) the date and type of report made;
- (c) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** for whom the report was made.

- ☐ 12.7 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** inspected the scene of the **INCIDENT**?

If so, for each inspection state:

- (a) the name, **ADDRESS**, and telephone number of the individual making the inspection (except for expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4));
- (b) the date of the inspection.

13.0 **Investigation—Surveillance**

- ☐ 13.1 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** conducted surveillance of any individual involved in the **INCIDENT** or any party to this action?

If so, for each surveillance state:

- (a) the name, **ADDRESS**, and telephone number of the individual or party;
- (b) the time, date, and place of the surveillance;
- (c) the name, **ADDRESS**, and telephone number of the individual who conducted the surveillance.

- ☐ 13.2 Has a written report been prepared on the surveillance?

If so, for each written report state:

- (a) the time;
- (b) the date;
- (c) the name, **ADDRESS**, and telephone number of the individual who prepared the report;
- (d) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the original or a copy.

14.0 **Statutory or Regulatory Violations**

- ☐ 14.1 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** contend that any **PERSON OR ENTITY** involved in the **INCIDENT** violated any statute, ordinance, or regulation and that the violation was a legal (proximate) cause of the **INCIDENT**?

If so, identify each **PERSON OR ENTITY** and the statute, ordinance, or regulation.

- ☐ 14.2 Was any **PERSON OR ENTITY** cited or charged with a violation of any statute, ordinance, or regulation as a result of this **INCIDENT**?

If so, for each **PERSON OR ENTITY** state:

- (a) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY**;
- (b) the statute, ordinance, or regulation allegedly violated;
- (c) whether the **PERSON OR ENTITY** entered a plea in response to the citation or charge and, if so, the plea entered;
- (d) the name and **ADDRESS** of the court or administrative agency, names of the parties, and case number.

15.0 **Affirmative Defenses**

- ☐ 15.1 Identify each denial of a material allegation in paragraph ____ (insert paragraph number) of your defensive pleading and for each:

- (a) state the facts upon which you base the denial;
- (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;

- (c) identify all **DOCUMENTS** and other tangible things which support your denial, and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

[Note: This interrogatory may be repeated as additional interrogatories for any paragraphs of the pleading which the responding party has denied.]

- ☐ 15.2 For your ~~Identify each denial of a material allegation and each~~ affirmative defense of ~~in your pleadings~~ _____ (insert name of affirmative defense) ~~and for each~~:

- (a) state the facts ~~all facts~~ upon which you base the ~~denial or~~ affirmative defense;
- (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of ~~those facts~~ the facts;
- (c) identify all **DOCUMENTS** and other tangible things which support your ~~denial or~~ affirmative defense, and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

[Note: This interrogatory may be repeated as additional interrogatories for any affirmative defenses which the responding party has pleaded.]

16.0 Defendant's Contentions ~~---~~ Personal Injury

[See Instructions § ~~Section~~ 2(c)]

- ☐ 16.1 Do you contend that any **PERSON OR ENTITY**, other than you or plaintiff, contributed to the occurrence of the **INCIDENT** or the injuries or damages claimed by plaintiff?

If so, for each **PERSON OR ENTITY**:

- (a) state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY**;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.2 Do you contend that plaintiff was not injured in the **INCIDENT**?

If so:

- (a) state ~~all facts~~ the facts upon which you base your contention;
- (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (c) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSONS OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.3 Do you contend that the injuries or the extent of the injuries claimed by plaintiff as disclosed in discovery proceedings thus far in this case were not caused by the **INCIDENT**?

If so, for each injury:

- (a) identify it;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.4 Do you contend that any of the services furnished by any **HEALTH CARE PROVIDER** claimed by plaintiff in discovery proceedings thus far in this case were not due to the **INCIDENT**?

If so:

- (a) identify each service;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.5 Do you contend that any of the costs of services furnished by any **HEALTH CARE PROVIDER** claimed as damages by plaintiff in discovery proceedings thus far in this case were unreasonable?

If so:

- (a) identify each cost;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.6 Do you contend that any part of the loss of earnings or income claimed by plaintiff in discovery proceedings thus far in this case was unreasonable or was not caused by the **INCIDENT**?

If so:

- (a) identify each part of the loss;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;

- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

☐ 16.7 Do you contend that any of the property damage claimed by plaintiff in discovery proceedings thus far in this case was not caused by the **INCIDENT**?

If so:

- (a) identify each item of property damage;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

☐ 16.8 Do you contend that any of the costs of repairing the property damage claimed by plaintiff in discovery proceedings thus far in this case were unreasonable?

If so:

- (a) identify each cost item;
- (b) state ~~all facts~~ the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

☐ 16.9 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** (for example, insurance bureau index reports) concerning claims for personal injuries made before or after the **INCIDENT** by a plaintiff in this case?

If so, for each plaintiff state:

- (a) the source of each **DOCUMENT**;
- (b) the date each claim arose;
- (c) the nature of each claim;
- (d) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

☐ 16.10 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** concerning the past or present physical, mental, or emotional condition of any plaintiff in this case from a **HEALTH CARE PROVIDER** not previously identified (except for expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4))?

If so, for each plaintiff state:

- (a) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER**;
- (b) a description of each **DOCUMENT**;

- (c) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

17.0 Responses to Request for Admissions *(Withdrawn. See C.R.C.P. 36(a), and 2017 Comment to C.R.C.P. 33.)*

~~17.1 Is your response to each request for admission served with these interrogatories an unqualified admission?~~

~~If not, for each response that is not an unqualified admission:~~

- ~~(a) state the number of the request;~~
- ~~(b) state all facts upon which you base your response;~~
- ~~(c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of those facts;~~
- ~~(d) identify all **DOCUMENTS** and other tangible things that support your response and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.~~

18.0 (Reserved)

19.0 (Reserved)

20.0 How the Incident Occurred ~~—~~ **Motor Vehicle**

- ☐ 20.1 State the date, time, and place (closest ~~street~~ **ADDRESS**, intersection, or highway) of the **INCIDENT**.
- ☐ 20.2 For each vehicle involved in the **INCIDENT**, state:
- (a) the year, make, model, and license number;
 - (b) the name, **ADDRESS**, and telephone number of the driver;
 - (c) the name, **ADDRESS**, and telephone number of each occupant other than the driver;
 - (d) the name, **ADDRESS**, and telephone number of each registered owner;
 - (e) the name, **ADDRESS**, and telephone number of each lessee;
 - (f) the name, **ADDRESS**, and telephone number of each owner other than the registered owner or lien holder;
 - (g) the name of each owner who gave permission or consent to the driver to operate the vehicle.
- ☐ 20.3 State the **ADDRESS** and location where your trip began, and the **ADDRESS** and location of your destination.
- ☐ 20.4 Describe the route that you followed from the beginning of your trip to the location of the **INCIDENT**, and state the location of each stop, other than routine traffic stops, during the trip leading up to the **INCIDENT**.
- ☐ 20.5 State the name of the street or roadway, the lane of travel, and the direction of travel of each vehicle involved in the **INCIDENT** for the 500 feet of travel before the **INCIDENT**.
- ☐ 20.6 Did the **INCIDENT** occur at an intersection?
If so, describe all traffic control devices, signals, or signs at the intersection.
- ☐ 20.7 Was there a traffic signal facing you at the time of the **INCIDENT**?

If so, state:

- (a) your location when you first saw it;
- (b) the color;
- (c) the ~~number of seconds~~ approximate length of time it had been that color;
- (d) whether the color changed between the time you first saw it and the **INCIDENT**.

☐ 20.8 State how the **INCIDENT** occurred, giving the speed, direction, and location of each vehicle involved:

- (a) just before the **INCIDENT**;
- (b) at the time of the **INCIDENT**;
- (c) just after the **INCIDENT**.

☐ 20.9 Do you have information that a malfunction or defect in a vehicle caused the **INCIDENT**?

If so:

- (a) identify the vehicle;
- (b) identify each malfunction or defect;
- (c) state the name, **ADDRESS**, and telephone number of each **PERSON** OR ENTITY who is a witness to or has information about each malfunction or defect;
- (d) state the name, **ADDRESS**, and telephone number of each **PERSON** OR ENTITY who has custody of each defective part.

☐ 20.10 Do you have information that any malfunction or defect in a vehicle contributed to the injuries sustained in the **INCIDENT**?

If so:

- (a) identify the vehicle;
- (b) identify each malfunction or defect;
- (c) state the name, **ADDRESS**, and telephone number of each **PERSON** OR ENTITY who is a witness to or has information about each malfunction or defect;
- (d) state the name, **ADDRESS**, and telephone number of each **PERSON** who has custody of each defective part.

☐ 20.11 State the name, **ADDRESS**, and telephone number of each owner and each **PERSON** OR ENTITY who has had possession since the **INCIDENT** of each vehicle involved in the **INCIDENT**.

25.0 (Reserved)

30.0 (Reserved)

40.0 (Reserved)

50.0 Contract

☐ 50.1 For each agreement alleged in the pleadings:f

- (a) identify all **DOCUMENTS** that are part of the agreement and, if you do not have copies of all documents, for each document you do not have, state the

name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**;

- (b) state each part of the agreement not in writing, the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** agreeing to that provision, and the date that part of the agreement was made;
- (c) identify all **DOCUMENTS** that evidence each part of the agreement not in writing and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**;
- (d) identify all **DOCUMENTS** that are part of each modification to the agreement, and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**;
- (e) state each modification not in writing, the date, and the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** agreeing to the modification, and the date the modification was made;
- (f) identify all **DOCUMENTS** that evidence each modification of the agreement not in writing and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**.

☐ 50.2 If ~~Was~~ there was a breach of any agreement alleged in the pleadings, ²
If ~~so~~, for each breach describe and give the date of every act or omission that you claim is the breach of the agreement.

☐ 50.3 If ~~Was~~ performance of any agreement alleged in the pleadings was excused, ²
If ~~so~~, identify each agreement excused and state why performance was excused.

☐ 50.4 If ~~Was~~ any agreement alleged in the pleadings was terminated by mutual agreement, release, accord and satisfaction, or novation, ² If ~~so~~, identify each agreement terminated and state why it was terminated including dates.

☐ 50.5 If ~~Is~~ any agreement alleged in the pleadings is unenforceable, ²
If ~~so~~, identify each unenforceable agreement and state why it is unenforceable.

☐ 50.6 If ~~Is~~ any agreement alleged in the pleadings is ambiguous, ²
If ~~so~~, identify each ambiguous agreement and state why it is ambiguous.

60.0 (Reserved)

Rule 33. Interrogatories to Parties

(a) [NO CHANGE]

(b) Answers and Objections.

(1) Each interrogatory shall be answered separately and fully, in writing and under oath, unless it is objected to, in which event the objecting party shall state the reasons for objection and shall answer under oath to the extent the interrogatory is not objectionable. An objection must state with specificity the grounds for objection to the interrogatory and must also state whether any responsive information is being withheld on the basis of that objection. A timely objection to an interrogatory stays the obligation to answer those portions of the interrogatory objected to until the court resolves the objection. No separate motion for protective order under C.R.C.P. 26(c) is required.

(2) – (5) **[NO CHANGE]**

(c) – (d) [NO CHANGE]

(e) Pattern and Non-Pattern Interrogatories; Limitations. The pattern interrogatories set forth in the Appendix to Chapters 1 to 17A, Form 20, are approved. Any pattern interrogatory and its subparts shall be counted as one interrogatory. Any discrete subparts in a non-pattern interrogatory shall be considered as a separate interrogatory.

COMMENTS

1995 [NO CHANGE]

2017

[1] Pattern interrogatories [Form 20, pursuant to C.R.C.P. 33(e)] have been modified to more appropriately conform to the 2015 amendments to C.R.C.P. 16, 26, and 33. A change to or deletion of a pre-2017 pattern interrogatory should not be construed as making that former interrogatory improper, but instead, only that the particular interrogatory is, as of the effective date of the 2017 rule change, modified as stated or no longer a “pattern interrogatory.”

[2] The change to C.R.C.P. 33(e) is made to conform to the holding of *Leaffer v. Zarlengo*, 44 P.3d 1072 (Colo. 2002).

District Court [<i>See</i> §2(a)]			
_____ County, Colorado			
Court Address:			
Plaintiff(s):			
v.			
Defendant(s):			
COURT USE ONLY			
Attorney or Party Without Attorney (Name and Address):			Case Number:
Phone Number:		E-mail:	
FAX Number:	Atty. Reg. #:	Division:	Courtroom:
PATTERN INTERROGATORIES UNDER RULE 33			

The following Pattern Interrogatories are propounded to:

[Insert name of party]_____ pursuant to C.R.C.P. 16(b)(11), 26, and 33(e).

Section 1. General Instructions

(a) These pattern interrogatories and instructions do not change existing Rules or other law relating to interrogatories. For time limitations, requirements for service on other parties, and other details, *see* C.R.C.P. 16(b)(11), 26, 33, 121 § 1-12, and the cases construing those Rules.

(b) These pattern interrogatories and instructions do not affect an answering party's right to assert any privilege or objection. Parties may object to these pattern interrogatories on grounds including, but not limited to, that the interrogatories exceed the scope of permissible discovery as defined in C.R.C.P. 26(b)(1) because the inquiry is not relevant to the claims and defenses of any party or is not proportional to the needs of the case.

Section 2. Instructions to the Asking Party

(a) These interrogatories are intended for optional use in district courts only. They are approved sample discovery requests but are not intended to be used in every case.

(b) Parties should carefully consider the claims and defenses at issue to determine whether these pattern interrogatories are applicable to their particular action. Parties also should carefully consider whether these pattern interrogatories are proportional to the discovery needs of their particular case.

(c) Parties are strongly encouraged to consider whether the information sought through these pattern interrogatories would be better obtained through requests for the production of documents containing the information sought. As one example, the objective of an interrogatory asking for information relating to a party's medical treatment might more efficiently be achieved by asking for the party's medical records in a request for production.

(d) C.R.C.P. 26(a)(1)(C) requires production of specific information relating to the categories and amounts of a party's claimed damages. As a result, interrogatories requesting information relating to claimed damages may not be necessary, or may be tailored to particular topics relating to a party's claimed damages.

(e) Check the box next to each interrogatory that you want the answering party to answer. Each checked box counts as one interrogatory for purposes of C.R.C.P. 26(b)(2)(B) and case management orders.

(f) The interrogatories in section 16.0, Defendant's Contentions—Personal Injury, should not be used until the defendant has had a reasonable opportunity to conduct an investigation or discovery of plaintiff's injuries and damages.

(g) Subject to the limitations in C.R.C.P. 16(b)(11) and 33, additional, non-pattern interrogatories may be included.

Section 3. Instructions to the Answering Party

(a) An answer or other appropriate response must be given to each interrogatory checked by the asking party.

(b) As a general rule, within 35 days after you are served with these interrogatories, you must serve your responses on the asking party and serve copies of your responses on all other parties to the action who have appeared. *See* C.R.C.P. 33 for details.

(c) Each answer must be as complete and straightforward as the information reasonably available to you permits. If an interrogatory cannot be answered completely, answer it to the extent possible.

(d) If you do not have enough personal knowledge to fully answer an interrogatory, say so, but make a reasonable and good faith effort to get the information by asking other persons or organizations, unless the information is equally available to the asking party.

(e) Whenever an interrogatory may be answered by referring to a document, the document may be attached as an exhibit to the response and referred to in the response. If the document has more than one page, refer to the page and section where the answer to the interrogatory can be found. In addition, C.R.C.P. 33(d) permits an answering party to identify and make available business records in lieu of responding to a particular interrogatory.

(f) Whenever an address and telephone number for the same person are requested in more than one interrogatory, you are required to furnish them in answering only the first interrogatory asking for that information.

(g) Your answers to these interrogatories must be verified, dated, and signed. You may use the following form at the end of your answers: "I declare under penalty of perjury under the laws of the State of Colorado that the foregoing answers are true and correct to the best of my knowledge, information and belief."

(DATE)_____ (SIGNATURE) _____

Section 4. Definitions

Words in **BOLDFACE CAPITALS** in these interrogatories are defined as follows:

(a) **INCIDENT** includes the circumstances and events surrounding the alleged accident, injury, or other occurrence or breach of contract giving rise to this action or proceeding.

(b) **YOU OR ANYONE ACTING ON YOUR BEHALF** includes you, your agents, your employees, your insurance companies, their agents, their employees, your attorneys, your accountants, your investigators, and anyone else acting on your behalf.

(c) **PERSON OR ENTITY** includes a natural person and any organization other than a natural person.

(d) **DOCUMENT** means a writing, as defined in CRE 1001, and includes the original or a copy of a handwriting, a typewriting, printing, photocopying, a photograph, electronically stored information (including emails), and every other means of recording upon any tangible thing and any form of communicating or representation, including letters, words, pictures, sounds, or symbols, or combinations of them.

(e) **HEALTH CARE PROVIDER** includes any **PERSON OR ENTITY** referred to as a "Health Care Institution" or "Health Care Professional" in C.R.S. § 13-64-202(3) and (4).

(f) **ADDRESS** means the street address, including the city, state, and zip code.

Section 5. Interrogatories

The following interrogatories have been approved by the Colorado Supreme Court under C.R.C.P. 16(b)(11), 26, and 33(e). The pattern interrogatories have been modified to more appropriately conform to the 2015 amendments to C.R.C.P. 16, 26, and 33. A change to or deletion of a pre-2017 pattern interrogatory should not be construed as making that former interrogatory improper, but instead, only that the particular interrogatory is, as of the effective date of the 2017 rule change, modified as stated or is no longer a “pattern interrogatory.”

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1.0 Identity of Persons Answering These Interrogatories

- ☐ 1.1 State the name, **ADDRESS**, telephone number, and relationship to you of each person who prepared or assisted in the preparation of the responses to these interrogatories. (Do not identify anyone who simply typed or reproduced the responses.)

2.0 General Background Information—Individual

- ☐ 2.1 State:
- (a) your name;
 - (b) every name you have used in the past;
 - (c) the dates you used each name;
 - (d) the date and place of your birth.
- ☐ 2.2 At the time of the **INCIDENT**, did you have a driver's license or any other permit or license for the operation of a motor vehicle?
- If so, state:
- (a) the state or other issuing entity;
 - (b) the license number and type;
 - (c) the date of issuance;
 - (d) all restrictions.
- ☐ 2.3 State:
- (a) your present residence **ADDRESS**;
 - (b) your residence **ADDRESSES** for the last five years;
 - (c) the dates you lived at each **ADDRESS**.
- ☐ 2.4 State:
- (a) the name, **ADDRESS**, and telephone number of your present employer or place of self-employment;
 - (b) the name, **ADDRESS**, dates of employment, job title, and nature of work for each employer or self-employment you have had from five years before the **INCIDENT** until today.
- ☐ 2.5 State:
- (a) the name and **ADDRESS** of each school or other academic or vocational institution you have attended beginning with high school;
 - (b) the dates you attended;
 - (c) the highest grade level you have completed;
 - (d) the degrees received.
- ☐ 2.6 Have you ever been convicted of a felony?
- If so, for each conviction state:
- (a) the city and state where you were convicted;
 - (b) the date of conviction;
 - (c) the offense;
 - (d) the court and case number.
- ☐ 2.7 Can you:

- (a) speak English with ease?
- (b) read English with ease?
- (c) write English with ease?

If the answer to any of sub-interrogatories 2.7 (a), (b) or (c) is “no,” what language and dialect do you normally use?

- ☐ 2.8 At the time of the **INCIDENT**, were you acting as an agent or employee for any **PERSON OR ENTITY**?

If so, state:

- (a) the name, **ADDRESS**, and telephone number of that **PERSON OR ENTITY**;
- (b) a description of your duties.

- ☐ 2.9 At the time of the **INCIDENT**, did you or any other person have any physical, emotional, or mental disability or condition that may have contributed to the occurrence of the **INCIDENT**?

If so, for each person state:

- (a) the name, **ADDRESS**, and telephone number;
- (b) the nature of the disability or condition;
- (c) the manner in which the disability or condition contributed to the occurrence of the **INCIDENT**.

3.0 General Background Information—Entity

- ☐ 3.1 Are you an entity? If so, state:

- (a) the type of entity you are;
- (b) the date and place where you were formed;
- (c) your current name;
- (d) all names under which you have operated within the last ten years, and the dates each name was used;
- (e) the **ADDRESS** of your principal place of business.

- ☐ 3.2 Have you done business under a fictitious name during the past ten years?

If so, for each fictitious name state:

- (a) the name;
- (b) the dates the name was used;
- (c) the state and county of each fictitious name filing;
- (d) the **ADDRESS** of your principal place of business.

- ☐ 3.3 Within the past five years, has any public entity registered or licensed your businesses?

If so, for each license or registration:

- (a) identify the license or registration;
- (b) state the name of the public entity;
- (c) state the dates of issuance and expiration.

- ☐ 3.4 State the name, **ADDRESS**, and the job title of the manager or managers most responsible for overseeing the **INCIDENT** or events leading to the **INCIDENT**.

4.0 Insurance (*Withdrawn. See C.R.C.P. 26(a)(1)(D), and 2017 Comment to C.R.C.P. 33.*)

5.0 (Reserved)

6.0 Physical, Mental, or Emotional Injuries

☐ 6.1 Do you attribute any physical, mental, or emotional injuries to the **INCIDENT**?

If your answer is “no,” do not answer interrogatories 6.2 through 6.7.

☐ 6.2 Identify each injury you attribute to the **INCIDENT** and the area of your body affected.

☐ 6.3 Do you still have any complaints that you attribute to the **INCIDENT**?

If so, for each complaint state:

- (a) a description;
- (b) whether the complaint is subsiding, remaining the same, or becoming worse;
- (c) the frequency and duration.

☐ 6.4 Did you receive any consultation or examination (except from expert witnesses covered by C.R.C.P. 35) or treatment from a **HEALTH CARE PROVIDER** for any injury you attribute to the **INCIDENT**?

If so, for each **HEALTH CARE PROVIDER** state:

- (a) the name, **ADDRESS**, and telephone number;
- (b) the type of consultation, examination, or treatment provided;
- (c) the dates you received consultation, examination, or treatment;
- (d) the charges to date.

☐ 6.5 Have you taken any medication, prescribed or not, as a result of injuries that you attribute to the **INCIDENT**?

If so, for each medication state:

- (a) the name;
- (b) the **PERSON OR ENTITY** who prescribed or furnished it;
- (c) the date prescribed or furnished;
- (d) the dates you began and stopped taking it;
- (e) the cost to date.

☐ 6.6 Are there any other medical services not previously listed (for example, ambulance, nursing, prosthetics)?

If so, for each service state:

- (a) the nature;
- (b) the date;
- (c) the cost;
- (d) the name, **ADDRESS**, and telephone number of each provider.

☐ 6.7 Has any **HEALTH CARE PROVIDER** advised that you may require future or additional treatment for any injuries that you attribute to the **INCIDENT**?

If so, for each injury state:

- (a) the name and **ADDRESS** of each **HEALTH CARE PROVIDER**;

- (b) the complaints for which the treatment was advised;
- (c) the nature, duration, and estimated cost of the treatment.

7.0 Property Damage

☐ 7.1 Do you attribute any loss of or damage to a vehicle or other property to the **INCIDENT**?

If so, for each item of property:

- (a) describe the property;
- (b) describe the nature and location of the damage to the property;
- (c) state the amount of damage you are claiming for each item of property and how the amount was calculated;
- (d) if the property was sold, state the name, **ADDRESS**, and telephone number of the seller, the date of sale, and the sale price.

☐ 7.2 Has a written estimate or evaluation been made for any item of property referred to in your answer to interrogatory 7.1?

If so, for each estimate or evaluation state:

- (a) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who prepared it and the date prepared;
- (b) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has a copy;
- (c) the amount of damage stated.

☐ 7.3 Has any item of property referred to in your answer to interrogatory 7.1 been repaired?

If so, for each item state:

- (a) the date repaired;
- (b) a description of the repair;
- (c) the repair cost;
- (d) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who repaired it;
- (e) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who paid for the repair.

8.0 Loss of Income or Earning Capacity

☐ 8.1 State:

- (a) the nature of your work;
- (b) your job title at the time of the **INCIDENT**;
- (c) the date your employment began.

☐ 8.2 State the last date before the **INCIDENT** that you worked for compensation.

☐ 8.3 State your monthly income at the time of the **INCIDENT** and how the amount was calculated.

☐ 8.4 State the date you returned to work at each place of employment following the **INCIDENT**.

- ☐ 8.5 State the dates you did not work and for which you lost income.
- ☐ 8.6 Will you lose income in the future as a result of the **INCIDENT**?

If so, state:

- (a) the facts upon which you base this contention;
- (b) an estimate of the amount;
- (c) an estimate of how long you will be unable to work;
- (d) how the claim for future income is calculated.

8.7 *(Pattern interrogatory 8.7 was withdrawn. See C.R.C.P. 26(a)(1)(C), and 2017 comment to C.R.C.P. 33.)*

9.0 Other Damages

- ☐ 9.1 Are there any other damages that you attribute to the **INCIDENT**?

If so, for each item of damage state:

- (a) the nature;
- (b) the date it occurred;
- (c) the amount;
- (d) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** to whom an obligation was incurred.

- ☐ 9.2 Do any **DOCUMENTS** support the existence or amount of any item of damages claimed in interrogatory 9.1?

If so, state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

10.0 Medical History

- ☐ 10.1 At any time before the **INCIDENT**, did you have complaints or injuries that involved the same part of your body claimed to have been injured in the **INCIDENT**?

If so, for each state:

- (a) a description;
- (b) the dates it began and ended;
- (c) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** whom you consulted or who examined or treated you.

10.2 *(Pattern interrogatory 10.2 was withdrawn. See 2017 Comment to C.R.C.P. 33.)*

- ☐ 10.3 At any time after the **INCIDENT**, did you sustain injuries of the kind for which you are now claiming damages?

If so, for each incident state:

- (a) the date and the place it occurred;
- (b) the name, **ADDRESS**, and telephone number of any other **PERSON OR ENTITY** involved;
- (c) the nature of any injuries you sustained;
- (d) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** that you consulted or who examined or treated you;
- (e) the nature of the treatment and its duration.

11.0 Other Claims and Previous Claims (*Withdrawn. See C.R.C.P. 26(b)(1), and 2017 Comment to C.R.C.P. 33.*)

12.0 Investigation—General

- ☐ 12.1 State the name, **ADDRESS**, and telephone number of each individual:
- (a) who witnessed the **INCIDENT** or the events occurring immediately before or after the **INCIDENT**;
 - (b) who made any statement at the scene of the **INCIDENT**;
 - (c) who heard any statements made about the **INCIDENT** by any individual at the scene;
 - (d) who **YOU OR ANYONE ACTING ON YOUR BEHALF** claims to have knowledge of the **INCIDENT** (except for expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4)).
- ☐ 12.2 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** interviewed any individual concerning the **INCIDENT**?
- If so, for each individual state:
- (a) the name, **ADDRESS**, and telephone number of the individual interviewed;
 - (b) the date of the interview;
 - (c) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who conducted the interview.
- ☐ 12.3 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** obtained a written or recorded statement from any individual concerning the **INCIDENT**?
- If so, for each statement state:
- (a) the name, **ADDRESS**, and telephone number of the individual from whom the statement was obtained;
 - (b) the name, **ADDRESS**, and telephone number of the individual who obtained the statement;
 - (c) the date the statement was obtained;
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the original statement or a copy.
- ☐ 12.4 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** know of any photographs, films, or videotapes depicting any place, object, or individual concerning the **INCIDENT** or plaintiff's injuries?
- If so, state:
- (a) the number of photographs or feet of film or videotape;
 - (b) the places, objects, or persons photographed, filmed, or videotaped;
 - (c) the date the photographs, films, or videotapes were taken;
 - (d) the name, **ADDRESS**, and telephone number of the individual taking the photographs, films, or videotapes;
 - (e) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the original or a copy.

- ☐ 12.5 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** know of any diagram, reproduction, or model of any place or thing (except for items developed by expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4)) concerning the **INCIDENT**?

If so, for each item state:

- (a) the type (i.e., diagram, reproduction, or model);
- (b) the subject matter;
- (c) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has it.

- ☐ 12.6 Was a report made by any **PERSON OR ENTITY** concerning the **INCIDENT**?

If so, state:

- (a) the name, title, identification number, and employer of the **PERSON OR ENTITY** who made the report;
- (b) the date and type of report made;
- (c) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** for whom the report was made.

- ☐ 12.7 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** inspected the scene of the **INCIDENT**?

If so, for each inspection state:

- (a) the name, **ADDRESS**, and telephone number of the individual making the inspection (except for expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4));
- (b) the date of the inspection.

13.0 Investigation—Surveillance

- ☐ 13.1 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** conducted surveillance of any individual involved in the **INCIDENT** or any party to this action?

If so, for each surveillance state:

- (a) the name, **ADDRESS**, and telephone number of the individual or party;
- (b) the time, date, and place of the surveillance;
- (c) the name, **ADDRESS**, and telephone number of the individual who conducted the surveillance.

- ☐ 13.2 Has a written report been prepared on the surveillance?

If so, for each written report state:

- (a) the time;
- (b) the date;
- (c) the name, **ADDRESS**, and telephone number of the individual who prepared the report;
- (d) the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the original or a copy.

14.0 Statutory or Regulatory Violations

- ☐ 14.1 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** contend that any **PERSON OR ENTITY** involved in the **INCIDENT** violated any statute, ordinance, or regulation and that the violation was a legal (proximate) cause of the **INCIDENT**? If so, identify each **PERSON OR ENTITY** and the statute, ordinance, or regulation.
- ☐ 14.2 Was any **PERSON OR ENTITY** cited or charged with a violation of any statute, ordinance, or regulation as a result of this **INCIDENT**? If so, for each **PERSON OR ENTITY** state:
- (a) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY**;
 - (b) the statute, ordinance, or regulation allegedly violated;
 - (c) whether the **PERSON OR ENTITY** entered a plea in response to the citation or charge and, if so, the plea entered;
 - (d) the name and **ADDRESS** of the court or administrative agency, names of the parties, and case number.

15.0 Defenses

- ☐ 15.1 Identify each denial of a material allegation in paragraph ____ (insert paragraph number) of your defensive pleading and for each:
- (a) state the facts upon which you base the denial;
 - (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
 - (c) identify all **DOCUMENTS** and other tangible things which support your denial, and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

[Note: This interrogatory may be repeated as additional interrogatories for any paragraphs of the pleading which the responding party has denied.]

- ☐ 15.2 For your affirmative defense of _____ (insert name of affirmative defense):
- (a) state the facts upon which you base the affirmative defense;
 - (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
 - (c) identify all **DOCUMENTS** and other tangible things which support your affirmative defense, and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

[Note: This interrogatory may be repeated as additional interrogatories for any affirmative defenses which the responding party has pleaded.]

16.0 Defendant's Contentions—Personal Injury

[See Instruction §2(c)]

- ☐ 16.1 Do you contend that any **PERSON OR ENTITY**, other than you or plaintiff, contributed to the occurrence of the **INCIDENT** or the injuries or damages claimed by plaintiff?

If so, for each **PERSON OR ENTITY**:

- (a) state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY**;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.2 Do you contend that plaintiff was not injured in the **INCIDENT**?

If so:

- (a) state the facts upon which you base your contention;
- (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (c) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSONS OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.3 Do you contend that the injuries or the extent of the injuries claimed by plaintiff as disclosed in discovery proceedings thus far in this case were not caused by the **INCIDENT**?

If so, for each injury:

- (a) identify it;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.4 Do you contend that any of the services furnished by any **HEALTH CARE PROVIDER** claimed by plaintiff in discovery proceedings thus far in this case were not due to the **INCIDENT**?

If so:

- (a) identify each service;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.5 Do you contend that any of the costs of services furnished by any **HEALTH CARE PROVIDER** claimed as damages by plaintiff in discovery proceedings thus far in this case were unreasonable?

If so:

- (a) identify each cost;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.6 Do you contend that any part of the loss of earnings or income claimed by plaintiff in discovery proceedings thus far in this case was unreasonable or was not caused by the **INCIDENT**?

If so:

- (a) identify each part of the loss;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.7 Do you contend that any of the property damage claimed by plaintiff in discovery proceedings thus far in this case was not caused by the **INCIDENT**?

If so:

- (a) identify each item of property damage;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;
- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

- ☐ 16.8 Do you contend that any of the costs of repairing the property damage claimed by plaintiff in discovery proceedings thus far in this case were unreasonable?

If so:

- (a) identify each cost item;
- (b) state the facts upon which you base your contention;
- (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS OR ENTITIES** who have knowledge of the facts;

- (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT** or thing.

☐ 16.9 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** (for example, insurance bureau index reports) concerning claims for personal injuries made before or after the **INCIDENT** by a plaintiff in this case?

If so, for each plaintiff state:

- (a) the source of each **DOCUMENT**;
- (b) the date each claim arose;
- (c) the nature of each claim;
- (d) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

☐ 16.10 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** concerning the past or present physical, mental, or emotional condition of any plaintiff in this case from a **HEALTH CARE PROVIDER** not previously identified (except for expert witnesses covered by C.R.C.P. 26(a)(2) and (b)(4))?

If so, for each plaintiff state:

- (a) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER**;
- (b) a description of each **DOCUMENT**;
- (c) the name, **ADDRESS**, and telephone number of the **PERSON OR ENTITY** who has each **DOCUMENT**.

17.0 Responses to Request for Admissions (*Withdrawn. See C.R.C.P. 36(a), and 2017 Comment to C.R.C.P. 33.*)

18.0 (Reserved)

19.0 (Reserved)

20.0 How the Incident Occurred—Motor Vehicle

☐ 20.1 State the date, time, and place (closest **ADDRESS**, intersection, or highway) of the **INCIDENT**.

☐ 20.2 For each vehicle involved in the **INCIDENT**, state:

- (a) the year, make, model, and license number;
- (b) the name, **ADDRESS**, and telephone number of the driver;
- (c) the name, **ADDRESS**, and telephone number of each occupant other than the driver;
- (d) the name, **ADDRESS**, and telephone number of each registered owner;
- (e) the name, **ADDRESS**, and telephone number of each lessee;
- (f) the name, **ADDRESS**, and telephone number of each owner other than the registered owner or lien holder;
- (g) the name of each owner who gave permission or consent to the driver to operate the vehicle.

- ☐ 20.3 State the **ADDRESS** and location where your trip began, and the **ADDRESS** and location of your destination.
- ☐ 20.4 Describe the route that you followed from the beginning of your trip to the location of the **INCIDENT**, and state the location of each stop, other than routine traffic stops, during the trip leading up to the **INCIDENT**.
- ☐ 20.5 State the name of the street or roadway, the lane of travel, and the direction of travel of each vehicle involved in the **INCIDENT** for the 500 feet of travel before the **INCIDENT**.
- ☐ 20.6 Did the **INCIDENT** occur at an intersection?
If so, describe all traffic control devices, signals, or signs at the intersection.
- ☐ 20.7 Was there a traffic signal facing you at the time of the **INCIDENT**?
If so, state:
- (a) your location when you first saw it;
 - (b) the color;
 - (c) the approximate length of time it had been that color;
 - (d) whether the color changed between the time you first saw it and the **INCIDENT**.
- ☐ 20.8 State how the **INCIDENT** occurred, giving the speed, direction, and location of each vehicle involved:
- (a) just before the **INCIDENT**;
 - (b) at the time of the **INCIDENT**;
 - (c) just after the **INCIDENT**.
- ☐ 20.9 Do you have information that a malfunction or defect in a vehicle caused the **INCIDENT**?
If so:
- (a) identify the vehicle;
 - (b) identify each malfunction or defect;
 - (c) state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who is a witness to or has information about each malfunction or defect;
 - (d) state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has custody of each defective part.
- ☐ 20.10 Do you have information that any malfunction or defect in a vehicle contributed to the injuries sustained in the **INCIDENT**?
If so:
- (a) identify the vehicle;
 - (b) identify each malfunction or defect;
 - (c) state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who is a witness to or has information about each malfunction or defect;

- (d) state the name, **ADDRESS**, and telephone number of each **PERSON** who has custody of each defective part.

☐ 20.11 State the name, **ADDRESS**, and telephone number of each owner and each **PERSON OR ENTITY** who has had possession since the **INCIDENT** of each vehicle involved in the **INCIDENT**.

25.0 (Reserved)

30.0 (Reserved)

40.0 (Reserved)

50.0 Contract

☐ 50.1 For each agreement alleged in the pleadings:

- (a) identify all **DOCUMENTS** that are part of the agreement and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**;
- (b) state each part of the agreement not in writing, the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** agreeing to that provision, and the date that part of the agreement was made;
- (c) identify all **DOCUMENTS** that evidence each part of the agreement not in writing and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**;
- (d) identify all **DOCUMENTS** that are part of each modification to the agreement, and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**;
- (e) state each modification not in writing, the date, and the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** agreeing to the modification, and the date the modification was made;
- (f) identify all **DOCUMENTS** that evidence each modification of the agreement not in writing and, if you do not have copies of all documents, for each document you do not have, state the name, **ADDRESS**, and telephone number of each **PERSON OR ENTITY** who has the **DOCUMENT**.

☐ 50.2 If there was a breach of any agreement alleged in the pleadings, for each breach describe and give the date of every act or omission that you claim is the breach of the agreement.

☐ 50.3 If performance of any agreement alleged in the pleadings was excused, identify each agreement excused and state why performance was excused.

☐ 50.4 If any agreement alleged in the pleadings was terminated by mutual agreement, release, accord and satisfaction, or novation, identify each agreement terminated and state why it was terminated including dates.

☐ 50.5 If any agreement alleged in the pleadings is unenforceable, identify each unenforceable agreement and state why it is unenforceable.

☐ 50.6 If any agreement alleged in the pleadings is ambiguous, identify each ambiguous agreement and state why it is ambiguous.

60.0 (Reserved)

Rule 103. Garnishment

This rule sets forth the exclusive process for garnishment. There shall be five (5) types of writs: (1) Writ of Continuing Garnishment, (2) Writ of Garnishment with Notice of Exemption and Pending Levy, (3) Writ of Garnishment for Support, (4) Writ of Garnishment--Judgment Debtor Other Than Natural Person, and (5) Writ of Garnishment in Aid of Writ of Attachment.

SECTION 1 WRIT OF CONTINUING GARNISHMENT (ON EARNINGS OF A NATURAL PERSON)

(a) [NO CHANGE]

(b) **Form of Writ of Continuing Garnishment and Related Forms.** A writ of continuing garnishment shall be in the form and content of Appendix to Chapters 1 to 17A, Form 26, C.R.C.P. It shall also include at least one ~~four~~ (14) “Calculation of Amount of Exempt Earnings” forms to be in the form and content of Appendix to Chapters 1 to 17A, Form 27, C.R.C.P. Objection to the calculation of exempt earnings shall be in the form and content of Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.

(c) **When Writ of Continuing Garnishment Issues.** After entry of judgment when a writ of execution can issue, a writ of continuing garnishment against earnings shall be issued by the clerk of the court upon request of the judgment creditor. Under a writ of continuing garnishment, a judgment creditor may garnish earnings except to the extent such earnings are exempt under law. Issuance of a writ of execution shall not be required.

(d) – (f) [NO CHANGE]

(g) **Exemptions.** A garnishee shall not be required to deduct, set up or plead any exemption for or on behalf of a judgment debtor excepting as set forth in the Exemption Chart contained in the writ.

(h) **Delivery of Copy to Judgment Debtor.**

(1) The garnishee shall deliver a copy of the writ of continuing garnishment, together with the calculation of the amount of exempt earnings and the blank copy of C.R.C.P. Form 28, “Objection to the Calculation of the Amount of Exempt Earnings” (Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.), to the judgment debtor at the time the judgment debtor receives earnings for the first pay period affected by such writ.

(2) For all subsequent pay periods affected by the writ, the garnishee shall deliver a copy of the calculation of the amount of exempt earnings and the “Judgment Debtor’s Objection to the Calculation of Amount of Exempt Earnings” to the judgment debtor at the time the judgment debtor receives earnings for that pay period.

(i) – (j) [NO CHANGE]

(k) Answer and Tender of Payment by Garnishee.

(1) The garnishee shall file the answer to the writ of continuing garnishment with the clerk of the court and send a copy to the judgment creditor no less than 7 nor more than 14 days following the time the judgment debtor receives earnings for each ~~the first~~ pay period affected by such writ, or 42 days following the date such writ was served pursuant to section (1)(d) of this rule, whichever is less. However, if the judgment creditor is represented by an attorney, or is a collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., the garnishee ~~may be directed to~~ shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the attorney or the licensed collection agency.

(2) Unless payment is made to an attorney or licensed collection agency as provided in paragraph (k)(1), ~~t~~The garnishee shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the clerk of the court which issued such writ no less than 7 nor more than 14 days following the time the judgment debtor receives earnings affected by such writ. However, if the answer and subsequent calculations are ~~only~~ mailed to an attorney or licensed collection agency under subsection (k)(1), the payment shall accompany the answer.

(3) Any writ of continuing garnishment served upon the garnishee while any previous writ is still in effect shall be answered by the garnishee with a statement that the garnishee has been previously served with one or more writs of continuing garnishment and/or writs of garnishment for support and specify the date on which such previously served writs are expected to terminate.

(l) Disbursement of Garnished Earnings.

(1) If no objection is filed by the judgment debtor within 7 days after the judgment debtor received earnings for a pay period, the garnishee shall send the nonexempt earnings to the attorney, collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., or court designated on the writ of continuing garnishment (C.R.C.P. Form 26, page 1, paragraph e). The judgment creditor shall refund to the judgment debtor any disbursement in excess of the amount necessary to satisfy the judgment.

(2) If a written objection to the calculation of exempt earnings is filed with the clerk of the court and a copy is delivered to the garnishee, the garnishee shall send the garnished nonexempt earnings to the clerk of the court. The garnished nonexempt earnings shall be placed in the registry of the court pending further order of the court.

(m) [NO CHANGE]

SECTION 2
WRIT OF GARNISHMENT
(ON PERSONAL PROPERTY OTHER THAN
EARNINGS OF A NATURAL PERSON)
WITH NOTICE OF EXEMPTION AND PENDING LEVY

(a) – (h) [NO CHANGE]

(i) Automatic Release of Garnishee. If a garnishee answers a writ with notice that the garnishee is indebted to the judgment debtor in an amount less than \$50.00 and no traverse has been filed, the garnishee shall automatically be released from said writ if the garnishee shall not have been ordered to pay the indebtedness to the clerk of the court within 182 days ~~six (6) months~~ from the date of service of such writ.

SECTION 3 – 5 [NO CHANGE]

SECTION 6
JUDGMENT DEBTOR'S OBJECTION--
WRITTEN CLAIM OF EXEMPTION—HEARING

(a) – (c) [NO CHANGE]

(d) Objection or Claim of Exemption Within 182 days ~~Six (6) Months~~.

(1) Notwithstanding the provisions of Section 6(a)(2) and Section 6(b)(1) of this rule, a judgment debtor failing to make and file a written objection or claim of exemption within the time therein provided, may, at any time within 182 days ~~six (6) months~~ from receipt of the copy of the writ with notice or a copy of the writ of continuing garnishment or the calculation of the amount of exempt earnings, move the court in which the judgment was entered to hear an objection or claim of exemption as to any earnings or property levied in garnishment which the judgment debtor claims to have been miscalculated or which the judgment debtor claims to be exempt.

(2) A hearing pursuant to this subsection shall be held only upon a verified showing, under oath, of good cause which shall include: mistake, accident, surprise, irregularity in proceedings, newly discovered evidence, events not in the control of the judgment debtor, or such other grounds as the court may allow, but in no event shall a hearing be held pursuant to this subsection on grounds available to the judgment debtor as the basis of an objection or claim of exemption within the time periods provided in Section 6(a)(2) and Section 6(b)(1).

(3) At such hearing, if the judgment giving rise to such claim has been satisfied against property or earnings of the judgment debtor, the court shall hear and summarily try and determine whether the amount of the judgment debtor's earnings paid to the judgment creditor was correctly calculated and whether the judgment debtor's property sold as upon execution was exempt. If the court finds earnings to have been miscalculated or if property is found to be exempt, the court shall enter judgment in favor of the judgment debtor for the amount of the over-garnished earnings or such exempt property or the value thereof which judgment shall be satisfied by

payment to the clerk of the court or the return of exempt property to the judgment debtor within three (3) business days.

(e) [NO CHANGE]

**SECTION 7
FAILURE OF GARNISHEE TO ANSWER
(ALL FORMS OF GARNISHMENT)**

(a) Default Entered by Clerk of Court.

(1) If a garnishee, having been served with any form of writ provided for by this rule, fails to answer or pay any nonexempt earnings as directed within the time required, the clerk of the court shall enter a default against such garnishee upon request.

(2) No default shall be entered in an attachment action against the garnishee until the expiration of ~~42~~³⁵ days after service of a writ of garnishment upon the garnishee.

(b) [NO CHANGE]

SECTION 8 – 13 [NO CHANGE]

Rule 103. Garnishment

This rule sets forth the exclusive process for garnishment. There shall be five (5) types of writs: (1) Writ of Continuing Garnishment, (2) Writ of Garnishment with Notice of Exemption and Pending Levy, (3) Writ of Garnishment for Support, (4) Writ of Garnishment--Judgment Debtor Other Than Natural Person, and (5) Writ of Garnishment in Aid of Writ of Attachment.

SECTION 1 WRIT OF CONTINUING GARNISHMENT (ON EARNINGS OF A NATURAL PERSON)

(a) [NO CHANGE]

(b) Form of Writ of Continuing Garnishment and Related Forms. A writ of continuing garnishment shall be in the form and content of Appendix to Chapters 1 to 17A, Form 26, C.R.C.P. It shall also include at least one (1) “Calculation of Amount of Exempt Earnings” form to be in the form and content of Appendix to Chapters 1 to 17A, Form 27, C.R.C.P. Objection to the calculation of exempt earnings shall be in the form and content of Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.

(c) When Writ of Continuing Garnishment Issues. After entry of judgment when a writ of execution can issue, a writ of continuing garnishment against earnings shall be issued by the clerk of the court upon request of the judgment creditor. Under a writ of continuing garnishment, a judgment creditor may garnish earnings except to the extent such earnings are exempt under law. Issuance of a writ of execution shall not be required.

(d) – (f) [NO CHANGE]

(g) Exemptions. A garnishee shall not be required to deduct, set up or plead any exemption for or on behalf of a judgment debtor excepting as set forth in the Exemption Chart contained in the writ.

(h) Delivery of Copy to Judgment Debtor.

(1) The garnishee shall deliver a copy of the writ of continuing garnishment, together with the calculation of the amount of exempt earnings and the blank copy of C.R.C.P. Form 28, “Objection to the Calculation of the Amount of Exempt Earnings” (Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.), to the judgment debtor at the time the judgment debtor receives earnings for the first pay period affected by such writ.

(2) For all pay periods affected by the writ, the garnishee shall deliver a copy of the calculation of the amount of exempt earnings and the “Judgment Debtor’s Objection to the Calculation of Amount of Exempt Earnings” to the judgment debtor at the time the judgment debtor receives earnings for that pay period.

(i) – (j) [NO CHANGE]

(k) Answer and Tender of Payment by Garnishee.

(1) The garnishee shall file the answer to the writ of continuing garnishment with the clerk of the court and send a copy to the judgment creditor no less than 7 nor more than 14 days following the time the judgment debtor receives earnings for each pay period affected by such writ, or 42 days following the date such writ was served pursuant to section (1)(d) of this rule, whichever is less. However, if the judgment creditor is represented by an attorney, or is a collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., the garnishee shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the attorney or the licensed collection agency.

(2) Unless payment is made to an attorney or licensed collection agency as provided in paragraph (k)(1), the garnishee shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the clerk of the court which issued such writ no less than 7 nor more than 14 days following the time the judgment debtor receives earnings affected by such writ. However, if the answer and subsequent calculations are mailed to an attorney or licensed collection agency under subsection (k)(1), the payment shall accompany the answer.

(3) Any writ of continuing garnishment served upon the garnishee while any previous writ is still in effect shall be answered by the garnishee with a statement that the garnishee has been previously served with one or more writs of continuing garnishment and/or writs of garnishment for support and specify the date on which such previously served writs are expected to terminate.

(l) Disbursement of Garnished Earnings.

(1) If no objection is filed by the judgment debtor within 7 days after the judgment debtor received earnings for a pay period, the garnishee shall send the nonexempt earnings to the attorney, collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., or court designated on the writ of continuing garnishment (C.R.C.P. Form 26, page 1, paragraph e). The judgment creditor shall refund to the judgment debtor any disbursement in excess of the amount necessary to satisfy the judgment.

(2) If a written objection to the calculation of exempt earnings is filed with the clerk of the court and a copy is delivered to the garnishee, the garnishee shall send the garnished nonexempt earnings to the clerk of the court. The garnished nonexempt earnings shall be placed in the registry of the court pending further order of the court.

(m) [NO CHANGE]

SECTION 2
WRIT OF GARNISHMENT
(ON PERSONAL PROPERTY OTHER THAN
EARNINGS OF A NATURAL PERSON)
WITH NOTICE OF EXEMPTION AND PENDING LEVY

(a) – (h) [NO CHANGE]

(i) Automatic Release of Garnishee. If a garnishee answers a writ with notice that the garnishee is indebted to the judgment debtor in an amount less than \$50.00 and no traverse has been filed, the garnishee shall automatically be released from said writ if the garnishee shall not have been ordered to pay the indebtedness to the clerk of the court within 182 days from the date of service of such writ.

SECTION 3 – 5 [NO CHANGE]

SECTION 6
JUDGMENT DEBTOR'S OBJECTION--
WRITTEN CLAIM OF EXEMPTION—HEARING

(a) – (c) [NO CHANGE]

(d) Objection or Claim of Exemption Within 182 days.

(1) Notwithstanding the provisions of Section 6(a)(2) and Section 6(b)(1) of this rule, a judgment debtor failing to make and file a written objection or claim of exemption within the time therein provided, may, at any time within 182 days from receipt of the copy of the writ with notice or a copy of the writ of continuing garnishment or the calculation of the amount of exempt earnings, move the court in which the judgment was entered to hear an objection or claim of exemption as to any earnings or property levied in garnishment which the judgment debtor claims to have been miscalculated or which the judgment debtor claims to be exempt.

(2) A hearing pursuant to this subsection shall be held only upon a verified showing, under oath, of good cause which shall include: mistake, accident, surprise, irregularity in proceedings, newly discovered evidence, events not in the control of the judgment debtor, or such other grounds as the court may allow, but in no event shall a hearing be held pursuant to this subsection on grounds available to the judgment debtor as the basis of an objection or claim of exemption within the time periods provided in Section 6(a)(2) and Section 6(b)(1).

(3) At such hearing, if the judgment giving rise to such claim has been satisfied against property or earnings of the judgment debtor, the court shall hear and summarily try and determine whether the amount of the judgment debtor's earnings paid to the judgment creditor was correctly calculated and whether the judgment debtor's property sold as upon execution was exempt. If the court finds earnings to have been miscalculated or if property is found to be exempt, the court shall enter judgment in favor of the judgment debtor for the amount of the over-garnished earnings or such exempt property or the value thereof which judgment shall be satisfied by

payment to the clerk of the court or the return of exempt property to the judgment debtor within three (3) business days.

(e) **[NO CHANGE]**

**SECTION 7
FAILURE OF GARNISHEE TO ANSWER
(ALL FORMS OF GARNISHMENT)**

(a) Default Entered by Clerk of Court.

(1) If a garnishee, having been served with any form of writ provided for by this rule, fails to answer or pay any nonexempt earnings as directed within the time required, the clerk of the court shall enter a default against such garnishee upon request.

(2) No default shall be entered in an attachment action against the garnishee until the expiration of 42 days after service of a writ of garnishment upon the garnishee.

(b) **[NO CHANGE]**

SECTION 8 – 13 [NO CHANGE]

Rule 403. Garnishment

NOTE: County Court Rule 403 is identical to C.R.C.P. 103 except for cross references within the County Court Rule to other County Court Rules. Forms used with the County Court are identical to those used with C.R.C.P. 103, and because County Court Rule 403 cites to and incorporates C.R.C.P. Forms 26 through 34, they need not be duplicated in the County Court Forms Section.

This rule sets forth the exclusive process for garnishment. There shall be five (5) types of writs: (1) Writ of Continuing Garnishment, (2) Writ of Garnishment with Notice of Exemption and Pending Levy, (3) Writ of Garnishment for Support, (4) Writ of Garnishment--Judgment Debtor Other Than Natural Person, and (5) Writ of Garnishment in Aid of Writ of Attachment.

SECTION 1. WRIT OF CONTINUING GARNISHMENT (ON EARNINGS OF A NATURAL PERSON)

(a) [NO CHANGE]

(b) **Form of Writ of Continuing Garnishment and Related Forms.** A writ of continuing garnishment shall be in the form and content of Appendix to Chapters 1 to 17A, Form 26, C.R.C.P. It shall also include at least ~~one~~ ~~four~~ (14) “Calculation of Amount of Exempt Earnings” forms to be in the form and content of Appendix to Chapters 1 to 17A, Form 27, C.R.C.P. Objection to the calculation of exempt earnings shall be in the form and content of Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.

(c) **When Writ of Continuing Garnishment Issues.** After entry of judgment when a writ of execution can issue, a writ of continuing garnishment against earnings shall be issued by the clerk of the court upon request of the judgment creditor. Under a writ of continuing garnishment, a judgment creditor may garnish earnings except to the extent such earnings are exempt under law. Issuance of a writ of execution shall not be required.

(d) – (f) [NO CHANGE]

(g) **Exemptions.** A garnishee shall not be required to deduct, set up or plead any exemption for or on behalf of a judgment debtor excepting as set forth in the Exemption Chart contained in the writ.

(h) **Delivery of Copy to Judgment Debtor.**

(1) The garnishee shall deliver a copy of the writ of continuing garnishment, together with the calculation of the amount of exempt earnings and the blank copy of C.R.C.P. Form 28, “Objection to the Calculation of the Amount of Exempt Earnings” (Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.), to the judgment debtor at the time the judgment debtor receives earnings for the first pay period affected by such writ.

(2) For all ~~subsequent~~ pay periods affected by the writ, the garnishee shall deliver a copy of the calculation of the amount of exempt earnings and the “Judgment Debtor’s Objection to the

Calculation of the Amount of Exempt Earnings” to the judgment debtor at the time the judgment debtor receives earnings for that pay period.

(i) – (j) [NO CHANGE]

(k) Answer and Tender of Payment by Garnishee.

(1) The garnishee shall file the answer to the writ of continuing garnishment with the clerk of the court and send a copy to the judgment creditor no less than 7 nor more than 14 days following the time the judgment debtor receives earnings for each ~~the first~~ pay period affected by such writ, or 42 days following the date such writ was served pursuant to section (1)(d) of this rule, whichever is less. However, if the judgment creditor is represented by an attorney, or is a collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., the garnishee ~~may be directed to shall~~ pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the attorney or the licensed collection agency.

(2) Unless payment is made to an attorney or licensed collection agency as provided in paragraph (k)(1), tThe garnishee shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the clerk of the court which issued such writ no less than 7 nor more than 14 days following the time the judgment debtor receives earnings affected by such writ. However, if the answer and subsequent calculations are ~~only~~ mailed to an attorney or licensed collection agency under subsection (k)(1), the payment shall accompany the answer.

(3) Any writ of continuing garnishment served upon the garnishee while any previous writ is still in effect shall be answered by the garnishee with a statement that the garnishee has been previously served with one or more writs of continuing garnishment and/or writs of garnishment for support and specify the date on which such previously served writs are expected to terminate.

(l) Disbursement of Garnished Earnings.

(1) If no objection is filed by the judgment debtor within 7 days after the judgment debtor received earnings for a pay period, the garnishee shall send the nonexempt earnings to the attorney, collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., or court designated on the writ of continuing garnishment (C.R.C.P. Form 26, page 1, paragraph e). The judgment creditor shall refund to the judgment debtor any disbursement in excess of the amount necessary to satisfy the judgment.

(2) If a written objection to the calculation of exempt earnings is filed with the clerk of the court and a copy is delivered to the garnishee, the garnishee shall send the garnished nonexempt earnings to the clerk of the court. The garnished nonexempt earnings shall be placed in the registry of the court pending further order of the court.

(m) [NO CHANGE]

SECTION 2
WRIT OF GARNISHMENT
(ON PERSONAL PROPERTY OTHER THAN
EARNINGS OF A NATURAL PERSON)
WITH NOTICE OF EXEMPTION AND PENDING LEVY

(a) – (h) [NO CHANGE]

(i) Automatic Release of Garnishee. If a garnishee answers a writ with notice that the garnishee is indebted to the judgment debtor in an amount less than \$50.00 and no traverse has been filed, the garnishee shall automatically be released from said writ if the garnishee shall not have been ordered to pay the indebtedness to the clerk of the court within 182 days ~~six (6) months~~ from the date of service of such writ.

SECTION 3 – 5 [NO CHANGE]

SECTION 6
JUDGMENT DEBTOR'S OBJECTION--
WRITTEN CLAIM OF EXEMPTION—HEARING

(a) – (c) [NO CHANGE]

(d) Objection or Claim of Exemption Within 182 days ~~Six (6) Months~~.

(1) Notwithstanding the provisions of Section 6(a)(2) and Section 6(b)(1) of this rule, a judgment debtor failing to make and file a written objection or claim of exemption within the time therein provided, may, at any time within 182 days ~~six (6) months~~ from receipt of the copy of the writ with notice or a copy of the writ of continuing garnishment or the calculation of the amount of exempt earnings, move the court in which the judgment was entered to hear an objection or claim of exemption as to any earnings or property levied in garnishment which the judgment debtor claims to have been miscalculated or which the judgment debtor claims to be exempt.

(2) A hearing pursuant to this subsection shall be held only upon a verified showing, under oath, of good cause which shall include: mistake, accident, surprise, irregularity in proceedings, newly discovered evidence, events not in the control of the judgment debtor, or such other grounds as the court may allow, but in no event shall a hearing be held pursuant to this subsection on grounds available to the judgment debtor as the basis of an objection or claim of exemption within the time periods provided in Section 6(a)(2) and Section 6(b)(1).

(3) At such hearing, if the judgment giving rise to such claim has been satisfied against property or earnings of the judgment debtor, the court shall hear and summarily try and determine whether the amount of the judgment debtor's earnings paid to the judgment creditor was correctly calculated and whether the judgment debtor's property sold as upon execution was exempt. If the court finds earnings to have been miscalculated or if property is found to be exempt, the court shall enter judgment in favor of the judgment debtor for the amount of the over-garnished earnings or such exempt property or the value thereof which judgment shall be satisfied by

payment to the clerk of the court or the return of exempt property to the judgment debtor within three (3) business days.

(e) [NO CHANGE]

**SECTION 7
FAILURE OF GARNISHEE TO ANSWER
(ALL FORMS OF GARNISHMENT)**

(a) Default Entered by Clerk of Court.

(1) If a garnishee, having been served with any form of writ provided for by this rule, fails to answer or pay any nonexempt earnings as directed within the time required, the clerk of the court shall enter a default against such garnishee upon request.

(2) No default shall be entered in an attachment action against the garnishee until the expiration of ~~42~~³⁵ days after service of a writ of garnishment upon the garnishee.

(b) [NO CHANGE]

SECTION 8 – 13 [NO CHANGE]

Rule 403. Garnishment

NOTE: County Court Rule 403 is identical to C.R.C.P. 103 except for cross references within the County Court Rule to other County Court Rules. Forms used with the County Court are identical to those used with C.R.C.P. 103, and because County Court Rule 403 cites to and incorporates C.R.C.P. Forms 26 through 34, they need not be duplicated in the County Court Forms Section.

This rule sets forth the exclusive process for garnishment. There shall be five (5) types of writs: (1) Writ of Continuing Garnishment, (2) Writ of Garnishment with Notice of Exemption and Pending Levy, (3) Writ of Garnishment for Support, (4) Writ of Garnishment--Judgment Debtor Other Than Natural Person, and (5) Writ of Garnishment in Aid of Writ of Attachment.

SECTION 1. WRIT OF CONTINUING GARNISHMENT (ON EARNINGS OF A NATURAL PERSON)

(a) [NO CHANGE]

(b) Form of Writ of Continuing Garnishment and Related Forms. A writ of continuing garnishment shall be in the form and content of Appendix to Chapters 1 to 17A, Form 26, C.R.C.P. It shall also include at least one (1) "Calculation of Amount of Exempt Earnings" form to be in the form and content of Appendix to Chapters 1 to 17A, Form 27, C.R.C.P. Objection to the calculation of exempt earnings shall be in the form and content of Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.

(c) When Writ of Continuing Garnishment Issues. After entry of judgment when a writ of execution can issue, a writ of continuing garnishment against earnings shall be issued by the clerk of the court upon request of the judgment creditor. Under a writ of continuing garnishment, a judgment creditor may garnish earnings except to the extent such earnings are exempt under law. Issuance of a writ of execution shall not be required.

(d) – (f) [NO CHANGE]

(g) Exemptions. A garnishee shall not be required to deduct, set up or plead any exemption for or on behalf of a judgment debtor excepting as set forth in the Exemption Chart contained in the writ.

(h) Delivery of Copy to Judgment Debtor.

(1) The garnishee shall deliver a copy of the writ of continuing garnishment, together with the calculation of the amount of exempt earnings and the blank copy of C.R.C.P. Form 28, "Objection to the Calculation of the Amount of Exempt Earnings" (Appendix to Chapters 1 to 17A, Form 28, C.R.C.P.), to the judgment debtor at the time the judgment debtor receives earnings for the first pay period affected by such writ.

(2) For all pay periods affected by the writ, the garnishee shall deliver a copy of the calculation of the amount of exempt earnings and the "Judgment Debtor's Objection to the Calculation of

the Amount of Exempt Earnings” to the judgment debtor at the time the judgment debtor receives earnings for that pay period.

(i) – (j) [NO CHANGE]

(k) Answer and Tender of Payment by Garnishee.

(1) The garnishee shall file the answer to the writ of continuing garnishment with the clerk of the court and send a copy to the judgment creditor no less than 7 nor more than 14 days following the time the judgment debtor receives earnings for each pay period affected by such writ, or 42 days following the date such writ was served pursuant to section (1)(d) of this rule, whichever is less. However, if the judgment creditor is represented by an attorney, or is a collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., the garnishee shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the attorney or the licensed collection agency.

(2) Unless payment is made to an attorney or licensed collection agency as provided in paragraph (k)(1), the garnishee shall pay any nonexempt earnings and deliver a calculation of the amount of exempt earnings to the clerk of the court which issued such writ no less than 7 nor more than 14 days following the time the judgment debtor receives earnings affected by such writ. However, if the answer and subsequent calculations are mailed to an attorney or licensed collection agency under subsection (k)(1), the payment shall accompany the answer.

(3) Any writ of continuing garnishment served upon the garnishee while any previous writ is still in effect shall be answered by the garnishee with a statement that the garnishee has been previously served with one or more writs of continuing garnishment and/or writs of garnishment for support and specify the date on which such previously served writs are expected to terminate.

(l) Disbursement of Garnished Earnings.

(1) If no objection is filed by the judgment debtor within 7 days after the judgment debtor received earnings for a pay period, the garnishee shall send the nonexempt earnings to the attorney, collection agency licensed pursuant to section 12-14-101, et seq., C.R.S., or court designated on the writ of continuing garnishment (C.R.C.P. Form 26, page 1, paragraph e). The judgment creditor shall refund to the judgment debtor any disbursement in excess of the amount necessary to satisfy the judgment.

(2) If a written objection to the calculation of exempt earnings is filed with the clerk of the court and a copy is delivered to the garnishee, the garnishee shall send the garnished nonexempt earnings to the clerk of the court. The garnished nonexempt earnings shall be placed in the registry of the court pending further order of the court.

(m) [NO CHANGE]

SECTION 2
WRIT OF GARNISHMENT
(ON PERSONAL PROPERTY OTHER THAN
EARNINGS OF A NATURAL PERSON)
WITH NOTICE OF EXEMPTION AND PENDING LEVY

(a) – (h) [NO CHANGE]

(i) Automatic Release of Garnishee. If a garnishee answers a writ with notice that the garnishee is indebted to the judgment debtor in an amount less than \$50.00 and no traverse has been filed, the garnishee shall automatically be released from said writ if the garnishee shall not have been ordered to pay the indebtedness to the clerk of the court within 182 days from the date of service of such writ.

SECTION 3 – 5 [NO CHANGE]

SECTION 6
JUDGMENT DEBTOR'S OBJECTION--
WRITTEN CLAIM OF EXEMPTION—HEARING

(a) – (c) [NO CHANGE]

(d) Objection or Claim of Exemption Within 182 days.

(1) Notwithstanding the provisions of Section 6(a)(2) and Section 6(b)(1) of this rule, a judgment debtor failing to make and file a written objection or claim of exemption within the time therein provided, may, at any time within 182 days from receipt of the copy of the writ with notice or a copy of the writ of continuing garnishment or the calculation of the amount of exempt earnings, move the court in which the judgment was entered to hear an objection or claim of exemption as to any earnings or property levied in garnishment which the judgment debtor claims to have been miscalculated or which the judgment debtor claims to be exempt.

(2) A hearing pursuant to this subsection shall be held only upon a verified showing, under oath, of good cause which shall include: mistake, accident, surprise, irregularity in proceedings, newly discovered evidence, events not in the control of the judgment debtor, or such other grounds as the court may allow, but in no event shall a hearing be held pursuant to this subsection on grounds available to the judgment debtor as the basis of an objection or claim of exemption within the time periods provided in Section 6(a)(2) and Section 6(b)(1).

(3) At such hearing, if the judgment giving rise to such claim has been satisfied against property or earnings of the judgment debtor, the court shall hear and summarily try and determine whether the amount of the judgment debtor's earnings paid to the judgment creditor was correctly calculated and whether the judgment debtor's property sold as upon execution was exempt. If the court finds earnings to have been miscalculated or if property is found to be exempt, the court shall enter judgment in favor of the judgment debtor for the amount of the over-garnished earnings or such exempt property or the value thereof which judgment shall be satisfied by

payment to the clerk of the court or the return of exempt property to the judgment debtor within three (3) business days.

(e) **[NO CHANGE]**

**SECTION 7
FAILURE OF GARNISHEE TO ANSWER
(ALL FORMS OF GARNISHMENT)**

(a) Default Entered by Clerk of Court.

(1) If a garnishee, having been served with any form of writ provided for by this rule, fails to answer or pay any nonexempt earnings as directed within the time required, the clerk of the court shall enter a default against such garnishee upon request.

(2) No default shall be entered in an attachment action against the garnishee until the expiration of 42 days after service of a writ of garnishment upon the garnishee.

(b) **[NO CHANGE]**

SECTION 8 – 13 [NO CHANGE]

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff(s)/Petitioner(s): _____ v. Defendant(s)/Respondent(s): _____	▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF CONTINUING GARNISHMENT	

Judgment Debtor's name, last known address, other identifying information: _____

1. Original or Revived Amount of Judgment Entered on _____ (date) for \$ _____
- DATE SUIT WAS COMMENCED:
(Mark Appropriate Box)
☐ Prior to May 1, 1991
☐ On or After May 1, 1991
- a. Effective Garnishment Period
- ☐ 91 days (Judgment entered prior to August 8, 2001)
☐ 182 days (Judgment entered on or after August 8, 2001)

2. Plus any Interest Due on Judgment (currently _____ % per annum) \$ _____

3. Taxable Costs (including estimated cost of service of this Writ) \$ _____

4. Less any Amount Paid \$ _____

5. Principal Balance/Total Amount Due and Owing \$ _____

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

Subscribed under oath before me on _____ (date)

Notary Public or Deputy Clerk

My Commission Expires: _____

Print Judgment Creditor's Name

Address: _____

By: _____
Signature (Type Name, Title, Address and Phone)

WRIT OF CONTINUING GARNISHMENT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County or to any person 18 years or older and who is not a party to this action:

You are directed to serve **TWO COPIES** of this Writ of Continuing Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE: YOU ARE SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of Court AND mail a completed copy with your answers to the Judgment Creditor or attorney no less than 7 nor more than 14 days following the time you pay the Judgment Debtor for the first time following service of this Writ, or 42 days following service of this Writ upon you, whichever is less. **YOUR FAILURE TO ANSWER THIS WRIT OF CONTINUING GARNISHMENT MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**

- b. To pay any nonexempt earnings to the party designated in "e" below no less than 7 nor more than 14 days following each time you pay the Judgment Debtor during the effective Garnishment Period of this Writ and attach a copy of the Calculation of the Amount of Exempt Earnings used (the Calculation under "Questions to be Answered by Garnishee" should be used for the first pay period, and one of the multiple Calculation forms included with this Writ should be used for all subsequent pay periods).
- c. To deliver a copy of this Writ, together with the Calculation of the Amount of Exempt Earnings and a blank Objection to Calculation of the Amount of Exempt Earnings form, the first time you pay the Judgment Debtor.
- d. To deliver to the Judgment Debtor a copy of each subsequent Calculation of the Amount of Exempt Earnings each time you pay the Judgment Debtor for earnings subject to this Writ.
- e. **MAKE CHECKS PAYABLE AND MAIL TO:** ☐ Judgment Creditor named above (only if the Judgment Creditor is a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.); ☐ Judgment Creditor's Attorney (if applicable); or to the ☐ Clerk of the ☐ County Court or ☐ District Court in _____ (city), Colorado (Must select if the Judgment Creditor is not represented by an attorney AND is not a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.)

Name: _____
Address: _____

PLEASE PUT THE CASE NUMBER (shown above) ON THE FRONT OF THE CHECK.

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

NOTICE TO GARNISHEE

- a. This Writ applies to all nonexempt earnings owed or owing during the Effective Garnishment Period shown on Line 1a on the front of this Writ or until you have paid to the party, designated in paragraph "e" on the front of this Writ, the amount shown on Line 5 on the front of this Writ, whichever occurs first. **However, if you have already been served with a Writ of Continuing Garnishment for Child Support, this new Writ is effective for the Effective Garnishment Period after any prior Writ terminates.**
- b. **"Earnings" includes all forms of compensation for Personal Services.** Also read "Notice to Judgment Debtor" below.
- c. In no case may you withhold any amount greater than the amount on Line 5 on the front of this Writ.

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ Case Number: _____

The following questions MUST be answered by you under oath:

- a. On the date and time this Writ of Continuing Garnishment was served upon you, did you owe or do you anticipate owing any of the following to the Judgment debtor within the Effective Garnishment Period shown on Line 1a on the front of this Writ? (Mark appropriate box(es)):
 - 1. ☐ WAGES/SALARY/COMMISSIONS/BONUS/OTHER COMPENSATION FOR PERSONAL SERVICES (Earnings)
 - 2. ☐ Health, Accident or Disability Insurance Funds or Payments
 - 3. ☐ Pension or Retirement Benefits (for suits commenced prior to 5/1/91 ONLY - check front of Writ for date)
If you marked any box above, indicate how the Judgment debtor is paid: ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly ☐ other The Judgment Debtor will be paid on the following dates during the Effective Garnishment Period shown on Line 1a (front of this Writ): _____
- b. Are you under one or more of the following writs of garnishment? (Mark appropriate box(es)):
 - 4. ☐ Writ of Continuing Garnishment (Expected Termination Date: _____)
 - 5. ☐ Writ of Garnishment for Support (Expected Termination Date: _____)

- c. If you marked Box 1 and you did NOT mark either Box 4 or 5, complete the Calculation below for each pay period the "First Pay Period" following receipt of this Writ. If you marked either Box 4 or 5, you must complete Calculations beginning with the first pay period following termination of the prior writ(s).
- d. If you marked Box 2 or 3 and you did NOT mark either Box 4 or 5, complete the Calculation below for each pay period the "First Pay Period" following receipt of this Writ. If you marked either box 4 or 5, you must complete Calculations beginning with the first pay period following termination of the prior writ(s). However, there are a number of total exemptions, and you should seek legal advice about such exemptions. **If the earnings are totally exempt, please mark box 6 below:**
6. ☐ The earnings are totally exempt because: _____

CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS (Each ~~First~~ Pay Period)

Gross Earnings for the First ~~Pay~~ Period from _____ thru _____ \$

Less Deductions Required by Law (For Example, Withholding Taxes, FICA) - \$ _____

Disposable Earnings (Gross Earnings less Deductions) = \$ _____

Less Statutory Exemption (Use Exemption Chart Below) - \$ _____

Net Amount Subject to Garnishment = \$ _____

Less Wage/Income Assignment(s) During Pay Period (If Any) - \$ _____

Amount to be withheld and paid = \$ _____

EXEMPTION CHART ("Minimum Hourly Wage" means state or federal minimum wage, whichever is greater.)	PAY PERIOD Weekly Bi-weekly Semi-monthly Monthly	AMOUNT EXEMPT IS THE GREATER OF: 30 x Minimum Hourly Wage or 75% of Disposable Earnings 60 x Minimum Hourly Wage or 75% of Disposable Earnings 65 x Minimum Hourly Wage or 75% of Disposable Earnings 130 x Minimum Hourly Wage or 75% of Disposable Earnings
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I certify that I am authorized to act for the Garnishee; that the above answers are true and correct; and that I have delivered a copy of this Writ, together with the Calculation of the Amount of Exempt Earnings and a blank Objection to Calculation of the Amount of Exempt Earnings form to the Judgment Debtor at the time earnings were paid for each pay period the "First Pay Period" (if earnings were paid).

Name of Garnishee (Print) _____
Address _____
Phone Number _____

Subscribed under affirmation or oath
before me on _____ (date)

Notary Public/Deputy Clerk
My Commission Expires: _____

Name of Person Answering (Print)

Signature of Person Answering

NOTICE TO JUDGMENT DEBTOR

- The Garnishee may only withhold nonexempt earnings from the amount due you, but in no event more than the amount on Line 5 on the front of this Writ, **UNLESS YOUR EARNINGS ARE TOTALLY EXEMPT**, in which case **NO EARNINGS CAN BE WITHHELD**. You may wish to contact a lawyer who can explain your rights.
- If you disagree with the amount withheld, you must talk with the Garnishee within 7 days after being paid.
- If you cannot settle the disagreement with the Garnishee, you may complete and file the attached Objection with the Clerk of the Court issuing this Writ within 14 days after being paid. **YOU MUST USE THE FORM ATTACHED** or a copy of it.
- You are entitled to a court hearing on your written objection.

- e. Your employer cannot fire you because your earnings have been garnished. If your employer discharges you in violation of your legal rights, you may, within 91 days, bring a civil action for the recovery of wages lost because you were fired and for an order requiring that you be reinstated. Damages will not exceed 6 weeks' wages and attorney fees.

RETURN OF SERVICE

Judgment Debtor's Name: _____ Case Number: _____

I certify that I am 18 years or older; that I am not a party to the action; and that I have served two copies of the Writ of Continuing Garnishment, together with a blank Objection to Calculation of the Amount of Exempt Earnings on _____ (name of party) in _____ (County) _____ (State) on _____ (date) _____ (time) at the following location: _____

By (Check one):

☐ By handing it to a person identified to me as _____ (name of garnishee).

☐ By leaving it with _____ (Type or write name legibly), who is designated to receive service because of a legal relationship with _____ (name of garnishee) as provided for in C.R.C.P. 4(e).

☐ I attempted to serve _____ (name of garnishee) on _____ occasions but have not been able to locate him/her/it. Return to the Judgment Creditor is made on _____ (date).

☐ I attempted to leave it with _____ (name of person) who refused service.

☐ Private process server _____

☐ Sheriff, _____ County _____ Signature of Process Server _____

Fee \$ _____ Mileage \$ _____

Name (Print or type)

Subscribed under affirmation or oath before me in the County of _____, State of _____,
this _____ day of _____, 20____.

Note: Notarization is not required for service by a sheriff or deputy.

My Commission Expires: _____

Notary Public/Clerk

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff(s)/Petitioner(s): _____ v. Defendant(s)/Respondent(s): _____		▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____		
Case Number: _____ Division _____ Courtroom _____		
WRIT OF CONTINUING GARNISHMENT		

Judgment Debtor's name, last known address, other identifying information: _____

1. Original or Revived Amount of Judgment Entered on _____ (date) for \$ _____

a. Effective Garnishment Period

☐ 91 days (Judgment entered prior to August 8, 2001)

☐ 182 days (Judgment entered on or after August 8, 2001)

2. Plus any Interest Due on Judgment (currently _____ % per annum) \$ _____

3. Taxable Costs (including estimated cost of service of this Writ) \$ _____

4. Less any Amount Paid \$ _____

5. Principal Balance/Total Amount Due and Owing \$ _____

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

Print Judgment Creditor's Name

Address: _____

By: _____
Signature (Type Name, Title, Address and Phone)

WRIT OF CONTINUING GARNISHMENT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County or to any person 18 years or older and who is not a party to this action:

You are directed to serve **TWO COPIES** of this Writ of Continuing Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE: YOU ARE SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of Court AND mail a completed copy with your answers to the Judgment Creditor or attorney no less than 7 nor more than 14 days following the time you pay the Judgment Debtor for the first time following service of this Writ, or 42 days following service of this Writ upon you, whichever is less. **YOUR FAILURE TO ANSWER THIS WRIT OF CONTINUING GARNISHMENT MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**

- b. To pay any nonexempt earnings to the party designated in "e" below no less than 7 nor more than 14 days following each time you pay the Judgment Debtor during the effective Garnishment Period of this Writ and attach a copy of the Calculation of the Amount of Exempt Earnings used (the Calculation under "Questions to be Answered by Garnishee" should be used for the first pay period, and one of the multiple Calculation forms included with this Writ should be used for all subsequent pay periods).
- c. To deliver a copy of this Writ, together with the Calculation of the Amount of Exempt Earnings and a blank Objection to Calculation of the Amount of Exempt Earnings form, the first time you pay the Judgment Debtor.
- d. To deliver to the Judgment Debtor a copy of each subsequent Calculation of the Amount of Exempt Earnings each time you pay the Judgment Debtor for earnings subject to this Writ.
- e. **MAKE CHECKS PAYABLE AND MAIL TO:** ☐ Judgment Creditor named above (only if the Judgment Creditor is a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.); ☐ Judgment Creditor's Attorney (if applicable); or to the ☐ Clerk of the ☐ County Court or ☐ District Court in _____ (city), Colorado (Must select if the Judgment Creditor is not represented by an attorney AND is not a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.)

Name: _____
Address: _____

PLEASE PUT THE CASE NUMBER (shown above) ON THE FRONT OF THE CHECK.

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

NOTICE TO GARNISHEE

- a. This Writ applies to all nonexempt earnings owed or owing during the Effective Garnishment Period shown on Line 1a on the front of this Writ or until you have paid to the party, designated in paragraph "e" on the front of this Writ, the amount shown on Line 5 on the front of this Writ, whichever occurs first. **However, if you have already been served with a Writ of Continuing Garnishment for Child Support, this new Writ is effective for the Effective Garnishment Period after any prior Writ terminates.**
- b. **"Earnings" includes all forms of compensation for Personal Services.** Also read "Notice to Judgment Debtor" below.
- c. In no case may you withhold any amount greater than the amount on Line 5 on the front of this Writ.

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ Case Number: _____

The following questions MUST be answered by you under oath:

- a. On the date and time this Writ of Continuing Garnishment was served upon you, did you owe or do you anticipate owing any of the following to the Judgment debtor within the Effective Garnishment Period shown on Line 1a on the front of this Writ? (Mark appropriate box(es)):
 - 1. ☐ WAGES/SALARY/COMMISSIONS/BONUS/OTHER COMPENSATION FOR PERSONAL SERVICES (Earnings)
 - 2. ☐ Health, Accident or Disability Insurance Funds or Payments
 - 3. ☐ Pension or Retirement Benefits (for suits commenced prior to 5/1/91 ONLY - check front of Writ for date)
If you marked any box above, indicate how the Judgment debtor is paid: ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly ☐ other The Judgment Debtor will be paid on the following dates during the Effective Garnishment Period shown on Line 1a (front of this Writ): _____
- b. Are you under one or more of the following writs of garnishment? (Mark appropriate box(es)):
 - 4. ☐ Writ of Continuing Garnishment (Expected Termination Date: _____)
 - 5. ☐ Writ of Garnishment for Support (Expected Termination Date: _____)

- c. If you marked Box 1 and you did NOT mark either Box 4 or 5, complete the Calculation below for each pay period following receipt of this Writ. If you marked either Box 4 or 5, you must complete Calculations beginning with the first pay period following termination of the prior writ(s).
- d. If you marked Box 2 or 3 and you did NOT mark either Box 4 or 5, complete the Calculation below for each pay period following receipt of this Writ. If you marked either box 4 or 5, you must complete Calculations beginning with the first pay period following termination of the prior writ(s). However, there are a number of total exemptions, and you should seek legal advice about such exemptions. **If the earnings are totally exempt, please mark box 6 below:**
6. ☐ The earnings are totally exempt because: _____

CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS (Each Pay Period)

Gross Earnings for the pay period from _____ thru _____ \$ _____

Less Deductions Required by Law (For Example, Withholding Taxes, FICA) - \$ _____

Disposable Earnings (Gross Earnings less Deductions) = \$ _____

Less Statutory Exemption (Use Exemption Chart Below) - \$ _____

Net Amount Subject to Garnishment = \$ _____

Less Wage/Income Assignment(s) During Pay Period (If Any) - \$ _____

Amount to be withheld and paid = \$ _____

EXEMPTION CHART ("Minimum Hourly Wage" means state or federal minimum wage, whichever is greater.)	PAY PERIOD	AMOUNT EXEMPT IS THE GREATER OF:
	Weekly	30 x Minimum Hourly Wage or 75% of Disposable Earnings
	Bi-weekly	60 x Minimum Hourly Wage or 75% of Disposable Earnings
	Semi-monthly	65 x Minimum Hourly Wage or 75% of Disposable Earnings
	Monthly	130 x Minimum Hourly Wage or 75% of Disposable Earnings

I certify that I am authorized to act for the Garnishee; that the above answers are true and correct; and that I have delivered a copy of this Writ, together with the Calculation of the Amount of Exempt Earnings and a blank Objection to Calculation of the Amount of Exempt Earnings form to the Judgment Debtor at the time earnings were paid for each pay period (if earnings were paid).

Name of Garnishee (Print) _____
 Address _____
 Phone Number _____

 Name of Person Answering (Print)

 Signature of Person Answering

NOTICE TO JUDGMENT DEBTOR

- a. The Garnishee may only withhold nonexempt earnings from the amount due you, but in no event more than the amount on Line 5 on the front of this Writ, UNLESS YOUR EARNINGS ARE TOTALLY EXEMPT, in which case NO EARNINGS CAN BE WITHHELD. You may wish to contact a lawyer who can explain your rights.
- b. If you disagree with the amount withheld, you must talk with the Garnishee within 7 days after being paid.
- c. If you cannot settle the disagreement with the Garnishee, you may complete and file the attached Objection with the Clerk of the Court issuing this Writ within 14 days after being paid. YOU MUST USE THE FORM ATTACHED or a copy of it.
- d. You are entitled to a court hearing on your written objection.
- e. Your employer cannot fire you because your earnings have been garnished. If your employer discharges you in violation of your legal rights, you may, within 91 days, bring a civil action for the recovery of wages lost because you were fired and for an order requiring that you be reinstated. Damages will not exceed 6 weeks' wages and attorney fees.

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court address: _____ Plaintiff(s): _____ v. Defendant(s): _____	
Judgment Debtor's Attorney or Judgment Debtor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty.Reg. #: _____	▲ COURT USE ONLY ▲ Case Number: _____ Division _____ Courtroom _____
OBJECTION TO CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS	

Instructions to Judgment Debtor: Use this form to object to the calculations of your exempt earnings.

Name: _____ Phone Number: _____
 Street Address: _____
 Mailing Address, if different: _____
 City: _____ State: _____ Zip Code: _____

EXEMPTION CHART <u>("Minimum Hourly Wage" means state or federal minimum wage, whichever is greater.)</u>	PAY PERIOD <u>Weekly</u> <u>Bi-Weekly</u> <u>Semi-monthly</u> <u>Monthly</u>	AMOUNT EXEMPT IS THE GREATER OF: <u>30 x Minimum Hourly Wage or 75% of Disposable Earnings</u> <u>60 x Minimum Hourly Wage or 75% of Disposable Earnings</u> <u>65 x Minimum Hourly Wage or 75% of Disposable Earnings</u> <u>130 x Minimum Hourly Wage or 75% of Disposable Earnings</u>
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1. **Judgment Debtor's objection** ~~I object~~ **to the Garnishee's Calculation of the Amount of Exempt Earnings because I believe that the correct calculation is:**

Gross Earnings for My Pay Period from _____ thru _____	\$ _____
Less Deductions Required by Law (For Example, Withholding Taxes, FICA)	- \$ _____
Disposable Earnings (Gross Earnings Less Deductions)	= \$ _____
Less Statutory Exemption (Use Exemption Chart on Writ)	- \$ _____
Net Amount Subject to Garnishment	= \$ _____
Less Wage/Income Assignment(s) During Pay Period (If Any)	- \$ _____
Amount which should be withheld	= \$ _____

OR

2. The earnings garnished are pension or retirement benefits/deferred compensation/health, accident or disability insurance **and they are totally exempt because:**

I understand that I must make a good faith effort to resolve my dispute with the Garnishee.

I ☐ **have** ☐ **have not** attempted to resolve this dispute with the Garnishee.

Name of Person I Talked to: _____

Position: _____ Phone Number: _____

Debtor's Notice to Garnishee: Even though I am filing this Objection, you are directed to send my nonexempt earnings to the Court at the address noted instead of to the party designated in paragraph "e" on the front of the Writ of Continuing Garnishment. The Court will hold my nonexempt earnings in its registry until my Objection is resolved.

I certify that the above is correct to the best of my knowledge and belief and that I sent a copy of this document by ☐certified mail (return receipt requested) to both the Garnishee and to the Judgment Creditor, or if the Judgment Creditor is represented by Counsel, ☐certified mail (return receipt requested) to the Judgment Creditor's Attorney or ☐E-Service to the Judgment Creditor's Attorney.

Garnishee

Address: _____

Judgment Creditor or Attorney

Address: _____

~~Subscribed under affirmation or oath~~
~~before me on~~ _____ (date)

Signature of Judgment Debtor or
Judgment Debtor's Counsel and Reg. Number

~~My Commission Expires:~~ _____

~~Notary Public/Deputy Clerk~~

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court address: _____ Plaintiff(s): _____ v. Defendant(s): _____	
Judgment Debtor's Attorney or Judgment Debtor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty.Reg. #: _____	▲ COURT USE ONLY ▲ Case Number: _____ Division _____ Courtroom _____
OBJECTION TO CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS	

Instructions to Judgment Debtor: Use this form to object to the calculations of your exempt earnings.

Name: _____ Phone Number: _____
 Street Address: _____
 Mailing Address, if different: _____
 City: _____ State: _____ Zip Code: _____

EXEMPTION CHART ("Minimum Hourly Wage" means state or federal minimum wage, whichever is greater.)	PAY PERIOD Weekly Bi-Weekly Semi-monthly Monthly	AMOUNT EXEMPT IS THE GREATER OF: 30 x Minimum Hourly Wage or 75% of Disposable Earnings 60 x Minimum Hourly Wage or 75% of Disposable Earnings 65 x Minimum Hourly Wage or 75% of Disposable Earnings 130 x Minimum Hourly Wage or 75% of Disposable Earnings
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1. Judgment Debtor's objection to the Garnishee's Calculation of the Amount of Exempt Earnings because I believe that the correct calculation is:

Gross Earnings for My Pay Period from _____ thru _____	\$ _____
Less Deductions Required by Law (For Example, Withholding Taxes, FICA)	- \$ _____
Disposable Earnings (Gross Earnings Less Deductions)	= \$ _____
Less Statutory Exemption (Use Exemption Chart on Writ)	- \$ _____
Net Amount Subject to Garnishment	= \$ _____
Less Wage/Income Assignment(s) During Pay Period (If Any)	- \$ _____
Amount which should be withheld	= \$ _____

OR

2. The earnings garnished are pension or retirement benefits/deferred compensation/health, accident or disability insurance and they are totally exempt because:

I understand that I must make a good faith effort to resolve my dispute with the Garnishee.

I ☐ **have** ☐ **have not** attempted to resolve this dispute with the Garnishee.

Name of Person I Talked to: _____

Position: _____ Phone Number: _____

Debtor's Notice to Garnishee: Even though I am filing this Objection, you are directed to send my nonexempt earnings to the Court at the address noted instead of to the party designated in paragraph "e" on the front of the Writ of Continuing Garnishment. The Court will hold my nonexempt earnings in its registry until my Objection is resolved.

I certify that the above is correct to the best of my knowledge and belief and that I sent a copy of this document by ☐certified mail (return receipt requested) to both the Garnishee and to the Judgment Creditor, or if the Judgment Creditor is represented by Counsel, ☐certified mail (return receipt requested) to the Judgment Creditor's Attorney or ☐E-Service to the Judgment Creditor's Attorney.

Garnishee

Address: _____

Judgment Creditor or Attorney

Address: _____

Signature of Judgment Debtor or
Judgment Debtor's Counsel and Reg. Number

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff(s)/Petitioner(s): v. Defendant(s)/Respondent(s):	▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT WITH NOTICE OF EXEMPTION AND PENDING LEVY	

The Judgment creditor is (check one): ☐ a licensed collection agency pursuant to §12-14-101, et. seq., C.R.S.;
☐ represented by an attorney; or ☐ not represented by an attorney and is not a licensed collection agency pursuant to §12-14-101, et. seq., C.R.S.

Judgment Debtor's name, last known address, other identifying information: _____

1. Original Amount of Judgment Entered _____ (date)	\$	_____
2. Plus any Interest Due on Judgment (<u>currently</u> _____ % per annum)	+	_____
\$ _____		
3. Taxable Costs (including estimated cost of service of this Writ)	+ \$	_____
4. Less any Amount Paid	- \$	_____
5. Principal Balance/Total Amount Due and Owing	= \$	_____

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

Subscribed under oath before me on _____

Print Judgment Creditor's Name

Notary Public or Deputy Clerk

Address: _____

My Commission Expires: _____

By: _____
Signature (Type Name, Title, Address and Phone No.)

WRIT OF GARNISHMENT WITH NOTICE OF EXEMPTION AND PENDING LEVY

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County, or to any person 18 years or older and who is not a party to this action:

You are directed to serve a copy of this Writ of Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of the Court (AND to mail a completed copy with your answers to the Judgment Creditor or attorney when a stamped envelope is attached) within 14 days following service of this Writ upon you. **YOUR FAILURE TO ANSWER THIS WRIT WITH NOTICE MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**
- b. To hold pending court order the personal property of any kind (other than earnings of a natural person) in your possession or control, including the debts, credits, choses in action or money owed to the Judgment Debtor whether they are due at the time of the service of the writ or are to become due thereafter.

YOU ARE NOTIFIED:

- a. This Writ with Notice applies to all personal property (other than earnings) owed to or owned by the Judgment Debtor and in your possession or control as of the date and time this Writ was served upon you.
- b. In no case may you withhold any personal property greater than the amount on Line 5 on the front of this Writ unless the personal property is incapable of being divided.
- c. After you file your answers to the following questions, **and after receiving a separate notice or order from the court, MAKE CHECKS PAYABLE AND MAIL TO:** ☐ the Judgment Creditor named above (May select only if the Judgment Creditor is a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.); ☐ the Judgment Creditor's Attorney (if applicable); or to the ☐ Clerk of the ☐ County Court or ☐ District Court in _____ (city), Colorado (Must select if the Judgment Creditor is not represented by an attorney AND is not a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.) at the address below:

Name: _____

Address: _____

PLEASE PUT THE CASE NUMBER (above) ON THE FRONT OF THE CHECK.

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ **Case Number:** _____

The following questions MUST be answered by you under oath:

- a. On the date and time this Writ was served upon you, did you possess or control any personal property of the Judgment Debtor or did you owe any rents, payments, obligations, debts or moneys other than earnings to the Judgment Debtor?

☐ YES ☐ NO

- b. If YES, list all items of personal property and their location(s) and/or describe the nature and amount of the debt or obligation: (Attach additional pages if necessary): _____

- c. Do you claim any setoff against any property, debt or obligation listed above? ☐ YES ☐ NO

- d. If you answered YES to question c, describe the nature and amount of the setoff claimed:

(Attach additional pages if necessary): _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

Name of Garnishee (Print) _____

Subscribed under oath before me on _____ (date) Address: _____

Phone Number _____

Notary Public/Deputy Clerk

My Commission Expires: _____ Name of Person Answering (Print) _____

Signature of Person Answering _____

NOTICE TO JUDGMENT DEBTOR OF EXEMPTION AND PENDING LEVY

This Writ with Notice is a Court order which may cause your property or money to be held and taken to pay a judgment entered against you. You have legal rights which may prevent all or part of your money or property from being taken. That part of the money or property which may not be taken is called "exempt property". A partial list of "exempt property" is shown below, along with the law which may make all or part of your money or property exempt. The purpose of this notice is to tell you about these rights.

PARTIAL LIST OF EXEMPT PROPERTY

1. All or part of your property listed in Sections 13-54-101 and 102, C.R.S., including clothing, jewelry, books, burial sites, household goods, food and fuel, farm animals, seed, tools, equipment and implements, military allowances, stock-in-trade and certain items used in your occupation, bicycles, motor vehicles (greater for disabled persons), life insurance, income tax refunds, ~~including a refund~~ attributed to an earned income tax credit or child tax credit, money received because of loss of property or for personal injury, equipment that you need because of your health, or money received because you were a victim of a crime.
2. All or part of your earnings under Section 13-54-104, C.R.S.
3. Worker's compensation benefits under Section 8-42-124, C.R.S.
4. Unemployment compensation benefits under Section 8-80-103, C.R.S.
5. Group life insurance benefits under Section 10-7-205, C.R.S.

6. Health insurance benefits under Section 10-16-212, C.R.S.
7. Fraternal society benefits under Section 10-14-403, C.R.S.
8. Family allowances under Section 15-11-404, C.R.S.
9. Teachers' retirement fund benefits under Section 22-64-120, C.R.S.
10. Public employees' retirement benefits (PERA) under Sections 24-51-212 and 24-54-111, C.R.S.
11. Social security benefits (OASDI, SSI) under 42 U.S.C. §407.
12. Railroad employee retirement benefits under 45 U.S.C. §231m.
13. Public assistance benefits (OAP, AFDC, TANF, AND, AB, LEAP) under Section 26-2-131, C.R.S.
14. Police Officer's and Firefighter's pension fund payments under Sections 31-30-1117 & 31-30.5-208 and 31-31-203, C.R.S.
15. Utility and security deposits under Section 13-54-102(1)(r), C.R.S.
16. Proceeds of the sale of homestead property under Section 38-41-207, C.R.S.
17. Veteran's Administration benefits under 38 U.S.C. §5301.
18. Civil service retirement benefits under 5 U.S.C. §8346.
19. Mobile homes and trailers under Section 38-41-201.6, C.R.S.
20. Certain retirement and pension funds and benefits under Section 13-54-102(1)(s), C.R.S.
21. A Court-ordered child support or maintenance obligation or payment under Section 13-54-102(1)(u), C.R.S.
22. Public or private disability benefits under Section 13-54-102(1)(v), C.R.S.

If the money or property which is being withheld from you includes any "exempt property," you must file within 14 days of receiving this notice a written Claim of Exemption with the Clerk of the Court describing what money or property you think is "exempt property" and the reason that it is exempt. YOU MUST USE THE APPROVED FORM attached to this Writ or a copy of it. When you file the claim, you must immediately deliver, by certified mail, return receipt requested, a copy of your claim to the Garnishee (person/place that was garnished) and to the Judgment Creditor's attorney, or if none, to the Judgment Creditor at the address shown on this Writ with Notice. Notwithstanding your right to claim the property as "exempt," no exemption other than the exemptions set forth in Section 13-54-104(3), C.R.S., may be claimed for a Writ which is the result of a judgment taken for arrearages for child support or for child support debt.

Once you have properly filed your claim, the court will schedule a hearing within 14 days. The Clerk of the Court will notify you and the Judgment Creditor or attorney of the date and time of the hearing, by telephone, by mail or in person.

When you come to your hearing, you should be ready to explain why you believe your money or property is "exempt property". If you do not appear at the scheduled time, your money or property may be taken by the Court to pay the judgment entered against you.

REMEMBER THAT THIS IS ONLY A PARTIAL LIST OF "EXEMPT PROPERTY"; you may wish to consult with a lawyer who can advise you of your rights. If you cannot afford one, there are listings of legal assistance and legal aid offices in the yellow pages of the telephone book.

You must act quickly to protect your rights. Remember, you only have 14 days after receiving this notice to file your claim of exemption with the Clerk of the Court.

RETURN OF SERVICE

Judgment Debtor's Name: _____ **Case Number:** _____

I declare under oath that I am 18 years or older and not a party to the action and have served a copy of this Writ of Garnishment on _____ (name of garnishee) in _____ (County) _____ (State) on _____ (date) _____ (time) at the following location:

By (Check one):

- ☐ By handing it to a person identified to me as _____ (name of garnishee):
- ☐ By leaving it with _____ (Type or write name legibly), who is designated to receive service because of a legal relationship with _____ (name of garnishee) as provided for in C.R.C.P. 4(e).
- ☐ I attempted to serve _____ (name of garnishee) on _____ occasions but have not been able to locate him/her/it. Return to the Judgment Creditor is made on _____ (date):
- ☐ I attempted to leave it with _____ (name of person) who refused service.
- ☐ Private process server _____
- ☐ Sheriff, _____ County _____ Signature of Server _____
- Fee \$ _____ Mileage \$ _____

Name (Print or type)

Subscribed and affirmed, or sworn to before me in the County of _____, State of _____, this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public/Clerk

Note: This Return of Service is not required if Garnishee is served by a sheriff or deputy. _____

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff(s)/Petitioner(s): v. Defendant(s)/Respondent(s):	▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT WITH NOTICE OF EXEMPTION AND PENDING LEVY	

The Judgment creditor is (check one): ☐ a licensed collection agency pursuant to §12-14-101, et. seq., C.R.S.;
☐ represented by an attorney; or ☐ not represented by an attorney and is not a licensed collection agency pursuant to §12-14-101, et. seq., C.R.S.

Judgment Debtor's name, last known address, other identifying information: _____

1. Original Amount of Judgment Entered _____ (date)	\$	
2. Plus any Interest Due on Judgment (currently _____ % per annum)	+	
3. Taxable Costs (including estimated cost of service of this Writ)	+ \$	
4. Less any Amount Paid	- \$	
5. Principal Balance/Total Amount Due and Owing	= \$	

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

 Print Judgment Creditor's Name
 Address: _____
 By: _____
 Signature (Type Name, Title, Address and Phone No.)

WRIT OF GARNISHMENT WITH NOTICE OF EXEMPTION AND PENDING LEVY

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County, or to any person 18 years or older and who is not a party to this action:
 You are directed to serve a copy of this Writ of Garnishment upon _____, Garnishee,
 with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of the Court (AND to mail a completed copy with your answers to the Judgment Creditor or attorney when a stamped envelope is attached) within 14 days following service of this Writ upon you. **YOUR FAILURE TO ANSWER THIS WRIT WITH NOTICE MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**
- b. To hold pending court order the personal property of any kind (other than earnings of a natural person) in your possession or control, including the debts, credits, choses in action or money owed to the Judgment Debtor whether they are due at the time of the service of the writ or are to become due thereafter.

YOU ARE NOTIFIED:

- a. This Writ with Notice applies to all personal property (other than earnings) owed to or owned by the Judgment Debtor and in your possession or control as of the date and time this Writ was served upon you.

- b. In no case may you withhold any personal property greater than the amount on Line 5 on the front of this Writ unless the personal property is incapable of being divided.
- c. After you file your answers to the following questions, **and after receiving a separate notice or order from the court, MAKE CHECKS PAYABLE AND MAIL TO:** ☐ the Judgment Creditor named above (May select only if the Judgment Creditor is a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.); ☐ the Judgment Creditor's Attorney (if applicable); or to the ☐ Clerk of the ☐ County Court or ☐ District Court in _____ (city), Colorado (Must select if the Judgment Creditor is not represented by an attorney AND is not a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.) at the address below:

Name: _____

Address: _____

PLEASE PUT THE CASE NUMBER (above) ON THE FRONT OF THE CHECK.

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ **Case Number:** _____

The following questions MUST be answered by you under oath:

- a. On the date and time this Writ was served upon you, did you possess or control any personal property of the Judgment Debtor or did you owe any rents, payments, obligations, debts or moneys other than earnings to the Judgment Debtor?

☐ YES ☐ NO

- b. If YES, list all items of personal property and their location(s) and/or describe the nature and amount of the debt or obligation: (Attach additional pages if necessary): _____

- c. Do you claim any setoff against any property, debt or obligation listed above? ☐ YES ☐ NO

- d. If you answered YES to question c, describe the nature and amount of the setoff claimed: (Attach additional pages if necessary): _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

Name of Garnishee (Print) _____

Subscribed under oath before me on _____ (date) Address: _____

Notary Public/Deputy Clerk Phone Number _____

My Commission Expires: _____ Name of Person Answering (Print) _____

Signature of Person Answering _____

NOTICE TO JUDGMENT DEBTOR OF EXEMPTION AND PENDING LEVY

This Writ with Notice is a Court order which may cause your property or money to be held and taken to pay a judgment entered against you. You have legal rights which may prevent all or part of your money or property from being taken. That part of the money or property which may not be taken is called "exempt property". A partial list of "exempt property" is shown below, along with the law which may make all or part of your money or property exempt. The purpose of this notice is to tell you about these rights.

PARTIAL LIST OF EXEMPT PROPERTY

1. All or part of your property listed in Sections 13-54-101 and 102, C.R.S., including clothing, jewelry, books, burial sites, household goods, food and fuel, farm animals, seed, tools, equipment and implements, military allowances, stock-in-trade and certain items used in your occupation, bicycles, motor vehicles (greater for disabled persons), life insurance, income tax refunds attributed to an earned income tax credit or child tax credit, money received because of loss of property or for personal injury, equipment that you need because of your health, or money received because you were a victim of a crime.
2. All or part of your earnings under Section 13-54-104, C.R.S.
3. Worker's compensation benefits under Section 8-42-124, C.R.S.
4. Unemployment compensation benefits under Section 8-80-103, C.R.S.
5. Group life insurance benefits under Section 10-7-205, C.R.S.
6. Health insurance benefits under Section 10-16-212, C.R.S.
7. Fraternal society benefits under Section 10-14-403, C.R.S.
8. Family allowances under Section 15-11-404, C.R.S.

9. Teachers' retirement fund benefits under Section 22-64-120, C.R.S.
10. Public employees' retirement benefits (PERA) under Sections 24-51-212 and 24-54-111, C.R.S.
11. Social security benefits (OASDI, SSI) under 42 U.S.C. §407.
12. Railroad employee retirement benefits under 45 U.S.C. §231m.
13. Public assistance benefits (OAP, AFDC, TANF, AND, AB, LEAP) under Section 26-2-131, C.R.S.
14. Police Officer's and Firefighter's pension fund payments under Sections 31-30-1117 & 31-30.5-208 and 31-31-203, C.R.S.
15. Utility and security deposits under Section 13-54-102(1)(r), C.R.S.
16. Proceeds of the sale of homestead property under Section 38-41-207, C.R.S.
17. Veteran's Administration benefits under 38 U.S.C. §5301.
18. Civil service retirement benefits under 5 U.S.C. §8346.
19. Mobile homes and trailers under Section 38-41-201.6, C.R.S.
20. Certain retirement and pension funds and benefits under Section 13-54-102(1)(s), C.R.S.
21. A Court-ordered child support or maintenance obligation or payment under Section 13-54-102(1)(u), C.R.S.
22. Public or private disability benefits under Section 13-54-102(1)(v), C.R.S.

If the money or property which is being withheld from you includes any "exempt property," you must file within 14 days of receiving this notice a written Claim of Exemption with the Clerk of the Court describing what money or property you think is "exempt property" and the reason that it is exempt. YOU MUST USE THE APPROVED FORM attached to this Writ or a copy of it. When you file the claim, you must immediately deliver, by certified mail, return receipt requested, a copy of your claim to the Garnishee (person/place that was garnished) and to the Judgment Creditor's attorney, or if none, to the Judgment Creditor at the address shown on this Writ with Notice. Notwithstanding your right to claim the property as "exempt," no exemption other than the exemptions set forth in Section 13-54-104(3), C.R.S., may be claimed for a Writ which is the result of a judgment taken for arrearages for child support or for child support debt.

Once you have properly filed your claim, the court will schedule a hearing within 14 days. The Clerk of the Court will notify you and the Judgment Creditor or attorney of the date and time of the hearing, by telephone, by mail or in person.

When you come to your hearing, you should be ready to explain why you believe your money or property is "exempt property". If you do not appear at the scheduled time, your money or property may be taken by the Court to pay the judgment entered against you.

REMEMBER THAT THIS IS ONLY A PARTIAL LIST OF "EXEMPT PROPERTY"; you may wish to consult with a lawyer who can advise you of your rights. If you cannot afford one, there are listings of legal assistance and legal aid offices in the yellow pages of the telephone book.

You must act quickly to protect your rights. Remember, you only have 14 days after receiving this notice to file your claim of exemption with the Clerk of the Court.

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ In re <input type="checkbox"/> The Marriage of: <input type="checkbox"/> Parental responsibilities concerning: _____ Petitioner: and Co-Petitioner/Respondent: _____	▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT FOR SUPPORT	

Judgment Debtor's name, last known address, other identifying information: _____

- | | | |
|--|------------|--|
| 1. Original Amount of Judgment Entered _____ (date) | \$ _____ | JUDGMENT FOR:
(Mark Appropriate Boxes) |
| 2. Plus any Interest Due on Judgment (<u>currently</u> _____ % per annum) | + \$ _____ | <input type="checkbox"/> Child Support ONLY |
| | | (Date of Order _____) |
| 3. Taxable Costs (including estimated cost of service of this Writ) | + \$ _____ | <input type="checkbox"/> Maintenance ONLY |
| 4. Less any Amount Paid | - \$ _____ | <input type="checkbox"/> Child Support and Maintenance |
| 5. Principal Balance/Total Amount Due and Owing | \$ _____ | <input type="checkbox"/> Case commenced after 4/30/91 |

Mark the Appropriate Box Below to Determine the Amount of the Statutory Exemption (MARK ONLY ONE BOX)

- ☐ The Judgment Debtor is supporting a spouse or a dependent child, and the judgment is for a period which is 12 weeks or older (Write "45" in the blank space on Line c, below).
- ☐ The Judgment Debtor is supporting a spouse or dependent child, and the judgment is for a period which is less than 12 weeks old (Write "50" in the blank space on Line c, below).
- ☐ The Judgment Debtor is not supporting a spouse or dependent child, and the judgment is for a period which is 12 weeks or older (Write "35" in the blank space on Line c, below).
- ☐ The Judgment Debtor is not supporting a spouse or dependent child, and the judgment is for a period which is less than 12 weeks old (Write "40" in the blank space on Line c, below).
- ☐ I do not know whether the Judgment Debtor is supporting a spouse or dependent child, but the judgment is for a period which is 12 weeks or older (Write "45" in the blank space on Line c, below).
- ☐ I do not know whether the Judgment Debtor is supporting a spouse or dependent child, but the judgment is for a period which is less than 12 weeks old (Write "50" in the blank space on Line c, below).

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

Subscribed under oath before me on _____

Notary Public/ Deputy Clerk

My Commission Expires: _____

Print Judgment Creditor's Name

Address: _____

By: _____

WRIT OF GARNISHMENT FOR SUPPORT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County, or to any person 18 years or older and who is not a party to this action:

You are directed to serve A COPY of this Writ of Garnishment for Support upon _____ Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- To answer the following questions under oath and file your answers with the Clerk of the Court (AND to mail a completed copy with your answers to the Judgment Creditor or attorney when a stamped envelope is attached) no less than 7 nor more than 14 days following the time you pay the Judgment Debtor for the first time following service of this Writ or 42 days following service of this Writ upon you, whichever is less. YOUR FAILURE TO ANSWER THIS WRIT OF GARNISHMENT FOR SUPPORT MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.
- To pay any nonexempt earnings to the payee as indicated in section d below no less than 7 nor more than 14 days following each time you pay the Judgment Debtor during the effective period of this Writ and attach a copy of the Calculation of the Amount of Exempt Earnings used (the Calculation under "Questions to be Answered by Garnishee" should be used for the first pay period, and one of the multiple Calculation forms included with this Writ should be used for all subsequent pay periods).
- The amount of the exemption is _____ % of disposable earnings.
- Payments shall be mailed to the:

☐ Family Support Registry
P. O. Box 2171
Denver, CO 80201-2171
Acct #: _____

☐ Judgment Creditor

CLERK OF THE COURT

By Deputy Clerk: _____

DATE: _____

NOTICE TO GARNISHEE

- This Writ applies to all nonexempt earnings owed or owing until the Principal Balance/Total Amount Due and Owing (Line 5 on the front of this Writ) has been withheld or the garnishment is released by the court or in writing by the Judgment Creditor. If you are presently under a Writ of Continuing Garnishment or served with such Writ while this Writ of Garnishment for Support is in effect, this Writ takes priority over the other Writs, and this is the only one in force and effect.
- "EARNINGS" INCLUDES ALL FORMS OF COMPENSATION FOR PERSONAL SERVICES.
- The percentage of disposable earnings shown on Line c above is exempt from this Writ of Garnishment for Support.
- In no case may you withhold any amount greater than the amount on Line 5 on the front of this Writ.

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ Case Number: _____

The following questions MUST be answered by you under oath:

- On the date and time this Writ of Garnishment for Support was served upon you, did you owe or do you anticipate owing any of the following to the Judgment Debtor? (Mark appropriate box(es)).
 - ☐ WAGES/SALARY/COMMISSIONS/BONUS/OTHER COMPENSATION FOR PERSONAL SERVICES (Earnings)
 - ☐ Pension or Retirement Benefits or Health/Accident/Disability/Casualty Insurance Funds or Payments.
 - ☐ Workers' Compensation Benefits or Payments (For child support in cases filed after 4/30/91 ONLY)
 - ☐ Payments to an Independent Contractor for Labor or Services, Dividends, Severance Pay, Royalties, Monetary Gifts/Prizes, Interest, Trust Income, Annuities, Capital Gains, Rents, or Taxable Distributions from Certain Business Entities (For child support orders entered after 6/30/96 ONLY)If you marked any box above, indicate how the Judgment Debtor is paid:
☐ WEEKLY ☐ BI-WEEKLY ☐ SEMI-MONTHLY ☐ MONTHLY ☐ OTHER
- If you marked Box 1, complete the Calculation below for the "First Pay Period" following receipt of this Writ.
- If you marked Box 2, 3 or 4, complete the Calculation below for the "First Pay Period" following receipt of this Writ; however, if the judgment includes maintenance (as indicated on the front of this Writ) the earnings may be totally exempt, and you should seek legal advice about such exemption. IF THE EARNINGS ARE TOTALLY EXEMPT, PLEASE MARK BOX 5 BELOW:
 - ☐ THE EARNINGS ARE TOTALLY EXEMPT BECAUSE _____

CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS (First Pay Period)

Gross Earnings for the First Pay Period from _____ through _____	\$ _____
Plus Tips Reported or Imputed by Federal Law (Child Support Orders after 6/30/96)	+ \$ _____
Less Deductions Required by Law (e.g., Withholding Taxes, FICA)	- \$ _____
Disposable Earnings (Gross Earnings Plus Tips (where applicable) Less Deductions)	= \$ _____
Less Statutory Exemption (Use percentage shown on Line c in the Writ portion above)	- \$ _____
Net Amount Subject to Garnishment	= \$ _____
Less Wage/Income Assignment(s) During Pay Period (If Any)	- \$ _____
Amount to be withheld	= \$ _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

	Name of Garnishee (Print) _____
Subscribed under oath before me on _____ (date)	Address: _____
	Phone Number: _____
Notary Public	Name of Person Answering (Print) _____
My Commission Expires: _____	Signature of Person Answering _____

RETURN OF SERVICE

Judgment Debtor's Name: _____ **Case Number:** _____

~~I declare under oath that I am 18 years or older and not a party to the action and have served a copy of this Writ of Garnishment for Support on _____ (name of party) in _____ (County) _____ (State) on _____ (date) _____ (time) at the following location:~~

By (Check one):

- ☐ By handing it to a person identified to me as _____ (name of garnishee).
- ☐ By leaving it with _____ (Type or write name legibly), who is designated to receive service because of a legal relationship with _____ (name of garnishee) as provided for in C.R.C.P. 4(e).
- ☐ I attempted to serve _____ (name of garnishee) on _____ occasions but have not been able to locate him/her/it. Return to the Judgment Creditor is made on _____ (date).
- ☐ I attempted to leave it with _____ (name of person) who refused service.
- ☐ Private process server _____
- ☐ Sheriff, _____ County _____ Signature of Process Server _____
- Fee \$ _____ Mileage \$ _____

Name (Print or type)

Subscribed and affirmed, or sworn to before me in the County of _____, State of _____, this _____ day of _____, 20____. **Note: Not required for service by a sheriff or deputy.**

My Commission Expires: _____

Notary Public/Clerk

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ In re <input type="checkbox"/> The Marriage of: <input type="checkbox"/> Parental responsibilities concerning: _____ Petitioner: and Co-Petitioner/Respondent: _____	▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT FOR SUPPORT	

Judgment Debtor's name, last known address, other identifying information: _____

- | | | |
|---|------------|--|
| 1. Original Amount of Judgment Entered _____ (date) | \$ _____ | JUDGMENT FOR:
(Mark Appropriate Boxes) |
| 2. Plus any Interest Due on Judgment (currently _____ % per annum) | + \$ _____ | <input type="checkbox"/> Child Support ONLY |
| | | (Date of Order _____) |
| 3. Taxable Costs (including estimated cost of service of this Writ) | + \$ _____ | <input type="checkbox"/> Maintenance ONLY |
| 4. Less any Amount Paid | - \$ _____ | <input type="checkbox"/> Child Support and Maintenance |
| 5. Principal Balance/Total Amount Due and Owing | \$ _____ | <input type="checkbox"/> Case commenced after 4/30/91 |

Mark the Appropriate Box Below to Determine the Amount of the Statutory Exemption (MARK ONLY ONE BOX)

- ☐ The Judgment Debtor is supporting a spouse or a dependent child, and the judgment is for a period which is 12 weeks or older (Write "45" in the blank space on Line c, below).
- ☐ The Judgment Debtor is supporting a spouse or dependent child, and the judgment is for a period which is less than 12 weeks old (Write "50" in the blank space on Line c, below).
- ☐ The Judgment Debtor is not supporting a spouse or dependent child, and the judgment is for a period which is 12 weeks or older (Write "35" in the blank space on Line c, below).
- ☐ The Judgment Debtor is not supporting a spouse or dependent child, and the judgment is for a period which is less than 12 weeks old (Write "40" in the blank space on Line c, below).
- ☐ I do not know whether the Judgment Debtor is supporting a spouse or dependent child, but the judgment is for a period which is 12 weeks or older (Write "45" in the blank space on Line c, below).
- ☐ I do not know whether the Judgment Debtor is supporting a spouse or dependent child, but the judgment is for a period which is less than 12 weeks old (Write "50" in the blank space on Line c, below).

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

Print Judgment Creditor's Name

Address: _____

By: _____
Signature (Type Name, Title, Address and Phone)

WRIT OF GARNISHMENT FOR SUPPORT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County, or to any person 18 years or older and who is not a party to this action:

You are directed to serve A COPY of this Writ of Garnishment for Support upon _____ Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- To answer the following questions under oath and file your answers with the Clerk of the Court (AND to mail a completed copy with your answers to the Judgment Creditor or attorney when a stamped envelope is attached) no less than 7 nor more than 14 days following the time you pay the Judgment Debtor for the first time following service of this Writ or 42 days following service of this Writ upon you, whichever is less. YOUR FAILURE TO ANSWER THIS WRIT OF GARNISHMENT FOR SUPPORT MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.
- To pay any nonexempt earnings to the payee as indicated in section d below no less than 7 nor more than 14 days following each time you pay the Judgment Debtor during the effective period of this Writ and attach a copy of the Calculation of the Amount of Exempt Earnings used (the Calculation under "Questions to be Answered by Garnishee" should be used for the first pay period, and one of the multiple Calculation forms included with this Writ should be used for all subsequent pay periods).
- The amount of the exemption is _____ % of disposable earnings.
- Payments shall be mailed to the:

☐ Family Support Registry
P. O. Box 2171
Denver, CO 80201-2171
Acct #: _____

☐ Judgment Creditor

CLERK OF THE COURT

By Deputy Clerk: _____

DATE: _____

NOTICE TO GARNISHEE

- This Writ applies to all nonexempt earnings owed or owing until the Principal Balance/Total Amount Due and Owing (Line 5 on the front of this Writ) has been withheld or the garnishment is released by the court or in writing by the Judgment Creditor. If you are presently under a Writ of Continuing Garnishment or served with such Writ while this Writ of Garnishment for Support is in effect, this Writ takes priority over the other Writs, and this is the only one in force and effect.
- "EARNINGS" INCLUDES ALL FORMS OF COMPENSATION FOR PERSONAL SERVICES.
- The percentage of disposable earnings shown on Line c above is exempt from this Writ of Garnishment for Support.
- In no case may you withhold any amount greater than the amount on Line 5 on the front of this Writ.

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ Case Number: _____

The following questions MUST be answered by you under oath:

- On the date and time this Writ of Garnishment for Support was served upon you, did you owe or do you anticipate owing any of the following to the Judgment Debtor? (Mark appropriate box(es)).
 - ☐ WAGES/SALARY/COMMISSIONS/BONUS/OTHER COMPENSATION FOR PERSONAL SERVICES (Earnings)
 - ☐ Pension or Retirement Benefits or Health/Accident/Disability/Casualty Insurance Funds or Payments.
 - ☐ Workers' Compensation Benefits or Payments (For child support in cases filed after 4/30/91 ONLY)
 - ☐ Payments to an Independent Contractor for Labor or Services, Dividends, Severance Pay, Royalties, Monetary Gifts/Prizes, Interest, Trust Income, Annuities, Capital Gains, Rents, or Taxable Distributions from Certain Business Entities (For child support orders entered after 6/30/96 ONLY)If you marked any box above, indicate how the Judgment Debtor is paid:
☐ WEEKLY ☐ BI-WEEKLY ☐ SEMI-MONTHLY ☐ MONTHLY ☐ OTHER
- If you marked Box 1, complete the Calculation below for the "First Pay Period" following receipt of this Writ.
- If you marked Box 2, 3 or 4, complete the Calculation below for the "First Pay Period" following receipt of this Writ; however, if the judgment includes maintenance (as indicated on the front of this Writ) the earnings may be totally exempt, and you should seek legal advice about such exemption. IF THE EARNINGS ARE TOTALLY EXEMPT, PLEASE MARK BOX 5 BELOW:
 - ☐ THE EARNINGS ARE TOTALLY EXEMPT BECAUSE _____

CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS (First Pay Period)

Gross Earnings for the First Pay Period from _____ through _____	\$ _____
Plus Tips Reported or Imputed by Federal Law (Child Support Orders after 6/30/96)	+ \$ _____
Less Deductions Required by Law (e.g., Withholding Taxes, FICA)	- \$ _____
Disposable Earnings (Gross Earnings Plus Tips (where applicable) Less Deductions)	= \$ _____
Less Statutory Exemption (Use percentage shown on Line c in the Wirt portion above)	- \$ _____
Net Amount Subject to Garnishment	= \$ _____
Less Wage/Income Assignment(s) During Pay Period (If Any)	- \$ _____
Amount to be withheld	= \$ _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

	Name of Garnishee (Print) _____
Subscribed under oath before me on _____ (date)	Address: _____
	Phone Number: _____
_____ Notary Public	Name of Person Answering (Print) _____
My Commission Expires: _____	Signature of Person Answering _____

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ _____ Plaintiff(s)/Petitioner(s): v. Defendant(s)/Respondent(s):	▲ COURT USE ONLY ▲
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: Division _____ Courtroom _____
WRIT OF GARNISHMENT – JUDGMENT DEBTOR OTHER THAN NATURAL PERSON	

Judgment Debtor's name, last known address, other identifying information: _____

1. Original Amount of Judgment Entered _____ (date)	\$	_____
2. Plus any Interest Due on Judgment (<u>currently</u> _____ % per annum)	+	_____
\$ _____		
3. Taxable Costs (including estimated cost of service of this Writ)	+ \$	_____
4. Less any Amount Paid	- \$	_____
5. Principal Balance/Total Amount Due and Owning	= \$	_____

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

Subscribed under oath before me on _____ (date)

Notary Public or Deputy Clerk

My Commission Expires: _____

Print Judgment Creditor's Name

Address: _____

By: _____

Signature (Type Name, Title, Address and Phone)

WRIT OF GARNISHMENT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County, or to any person 18 years or older and who is not a party to this action:

You are directed to serve a copy of this Writ of Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of the Court (AND to mail a completed copy with your answer to the Judgment Creditor or attorney when a stamped envelope is attached) within 14 days following service of this Writ upon you. **YOUR FAILURE TO ANSWER THIS WRIT WITH NOTICE MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**
- b. To hold pending court order any personal property owed to or owned by the Judgment Debtor and in your possession or control on the date and time this Writ was served upon you.

YOU ARE NOTIFIED:

- a. This Writ of Garnishment applies to all personal property owed to or owned by the Judgment Debtor and in your possession or control as of the date and time this Writ was served upon you.
- b. In no case may you withhold any personal property greater than the amount on Line 5 on the front of this Writ unless the personal property is incapable of being divided.
- c. After you file your answers to the following questions, **and after receiving a separate notice or order from the court,**

MAKE CHECKS PAYABLE AND MAIL TO: ☐ the Judgment Creditor named above (May select only if the Judgment Creditor is a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.); ☐ the Judgment Creditor's Attorney (if

applicable); or to the ☐ Clerk of the ☐ County Court or ☐ District Court in _____ (city), Colorado
(Must select if the Judgment Creditor is not represented by an attorney AND is not a licensed collection agency pursuant
to 12-14-101, et. seq., C.R.S.) at the address below:

Name: _____

Address: _____

PLEASE PUT THE CASE NUMBER (above) ON THE FRONT OF THE CHECK.

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ **Case Number:** _____

The following questions MUST be answered by you under oath:

- a. On the date and time this Writ was served upon you, did you possess or control any personal property of the Judgment Debtor or did you owe any rents, payments, obligations, debts or moneys to the Judgment Debtor?
☐ YES ☐ NO
- b. If YES, list all items of personal property and their location(s) and/or describe the nature and amount of the debt or obligation: (Attach additional pages is necessary): _____

- c. Do you claim any setoff against any property, debt or obligation listed above?
☐ YES ☐ NO
- d. If you answered YES to question c, describe the nature and amount of the setoff claimed:
(Attach additional pages if necessary): _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

Subscribed under oath before me on _____ (date)

Name of Garnishee (Print) _____

Address: _____

Phone Number: _____

Notary Public

Name of Person Answering (Print) _____

My Commission Expires: _____

Signature of Person Answering _____

RETURN OF SERVICE

Judgment Debtor's Name: _____ Case Number: _____

I declare under oath that I am 18 years or older and not a party to the action and have served a copy of this Writ of Garnishment on _____ (name of party) in _____ (County) _____ (State) on _____ (date) _____ (time) at the following location:

By (Check one):

- ☐ By handing it to a person identified to me as _____ (name of garnishee).
- ☐ By leaving it with _____ (Type or write name legibly), who is designated to receive service because of a legal relationship with _____ (name of garnishee) as provided for in C.R.C.P. 4(e).
- ☐ I attempted to serve _____ (name of garnishee) on _____ occasions but have not been able to locate him/her/it. Return to the Judgment Creditor is made on _____ (date).
- ☐ I attempted to leave it with _____ (name of person) who refused service.

☐ Private process server _____

☐ Sheriff, _____ County _____ Signature of Process Server _____

Fee \$ _____ Mileage \$ _____

Name (Print or type)

Subscribed and affirmed, or sworn to before me in the County of _____, State of _____, this _____ day of _____, 20_____. **Note: Not required for service by a sheriff or deputy.**

My Commission Expires: _____

Notary Public/Clerk

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff(s)/Petitioner(s): _____ v. Defendant(s)/Respondent(s): ▲ ▲	COURT USE ONLY
Judgment Creditor's Attorney or Judgment Creditor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT – JUDGMENT DEBTOR OTHER THAN NATURAL PERSON	

Judgment Debtor's name, last known address, other identifying information: _____

- | | | |
|---|------|-------|
| 1. Original Amount of Judgment Entered _____ (date) | \$ | _____ |
| 2. Plus any Interest Due on Judgment (currently _____ % per annum) | + | _____ |
| \$ _____ | | |
| 3. Taxable Costs (including estimated cost of service of this Writ) | + \$ | _____ |
| 4. Less any Amount Paid | - \$ | _____ |
| 5. Principal Balance/Total Amount Due and Owning | = \$ | _____ |

I affirm under penalty of perjury that I am authorized to act for the Judgment Creditor and this is a correct statement as of _____ (date).

 Print Judgment Creditor's Name
 Address: _____

 By: _____
 Signature (Type Name, Title, Address and Phone)

WRIT OF GARNISHMENT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County, or to any person 18 years or older and who is not a party to this action:

You are directed to serve a copy of this Writ of Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of the Court (AND to mail a completed copy with your answer to the Judgment Creditor or attorney when a stamped envelope is attached) within 14 days following service of this Writ upon you. **YOUR FAILURE TO ANSWER THIS WRIT WITH NOTICE MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**
- b. To hold pending court order any personal property owed to or owned by the Judgment Debtor and in your possession or control on the date and time this Writ was served upon you.

YOU ARE NOTIFIED:

- a. This Writ of Garnishment applies to all personal property owed to or owned by the Judgment Debtor and in your possession or control as of the date and time this Writ was served upon you.
- b. In no case may you withhold any personal property greater than the amount on Line 5 on the front of this Writ unless the personal property is incapable of being divided.
- c. After you file your answers to the following questions, **and after receiving a separate notice or order from the court,**

MAKE CHECKS PAYABLE AND MAIL TO: ☐ the Judgment Creditor named above (May select only if the Judgment Creditor is a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.); ☐ the Judgment Creditor's Attorney (if applicable); or to the ☐ Clerk of the ☐ County Court or ☐ District Court in _____ (city), Colorado

(Must select if the Judgment Creditor is not represented by an attorney AND is not a licensed collection agency pursuant to 12-14-101, et. seq., C.R.S.) at the address below:

Name: _____

Address: _____

PLEASE PUT THE CASE NUMBER (above) ON THE FRONT OF THE CHECK.

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

QUESTIONS TO BE ANSWERED BY GARNISHEE

Judgment Debtor's Name: _____ Case Number: _____

The following questions MUST be answered by you under oath:

- a. On the date and time this Writ was served upon you, did you possess or control any personal property of the Judgment Debtor or did you owe any rents, payments, obligations, debts or moneys to the Judgment Debtor?

☐ YES ☐ NO

- b. If YES, list all items of personal property and their location(s) and/or describe the nature and amount of the debt or obligation: (Attach additional pages if necessary): _____

- c. Do you claim any setoff against any property, debt or obligation listed above?

☐ YES ☐ NO

- d. If you answered YES to question c, describe the nature and amount of the setoff claimed:

(Attach additional pages if necessary): _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

Name of Garnishee (Print) _____

Subscribed under oath before me on _____ (date)

Address: _____

Phone Number: _____

Notary Public

Name of Person Answering (Print) _____

My Commission Expires: _____

Signature of Person Answering _____

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ Plaintiff(s)/Petitioner(s): v. Defendant(s)/Respondent(s):	<div style="text-align: center; font-weight: bold; margin-top: 100px;">▲ COURT USE ONLY ▲</div>
Attorney or Party without Attorney (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT IN AID OF WRIT OF ATTACHMENT	

Defendant in Attachment's name, last known address, other identifying information: _____

- | | | |
|---|------|--|
| 1. Original Amount of Claim | \$ | |
| 2. Plus any Interest Due on Claim (currently _____ % per annum from _____ (date)) | + | |
| 3. Taxable Costs (including estimated cost of service of this Writ) | + \$ | |
| 4. Less any Amount Paid | - \$ | |
| 5. Principal Balance/Total Amount Due and Owing | = \$ | |

I affirm under penalty of perjury that I am authorized to act for the Plaintiff in Attachment and this is a true and correct statement as of _____ (date).

Subscribed under oath before me on _____ (date)

Notary Public or Deputy Clerk

My Commission Expires: _____

Print Plaintiff in Attachment's Name

Address: _____

By: _____
Signature (Type Name, Title, Address and Phone)

WRIT OF GARNISHMENT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County or to any person 18 years or older and not a party to this action:

You are directed to serve a copy of this Writ of Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of the Court (**AND** to mail a completed copy with your answer to the Plaintiff in Attachment or attorney when a stamped envelope is attached) within 14 days following service of this Writ upon you. **YOUR FAILURE TO ANSWER THIS WRIT MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**
- b. To hold pending court order any personal property (other than earnings of a natural person) owed to or owned by the Defendant in Attachment and in your possession or control on the date and time this Writ was served upon you.

YOU ARE NOTIFIED:

- a. This Writ applies to all personal property (other than earnings of a natural person) owed to or owned by the Defendant in Attachment and in your possession or control as of the date and time this Writ was served upon you.
- b. In no case may you withhold any personal property greater than the amount on Line 5 on the front of this Writ unless the personal property is incapable of being divided.
- c. If you are ordered to pay funds to the Court, tender your check for the amount ordered **PAYABLE TO THE CLERK OF THE** _____ **COURT AT** _____, **CO** _____

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

QUESTIONS TO BE ANSWERED BY GARNISHEE

Defendant in Attachment's Name: _____ **Case Number:** _____

The following questions **MUST** be answered by you under oath:

- a. On the date and time this Writ was served upon you, did you possess or control any personal property of the Defendant in Attachment or did you owe any rents, payments, obligations, debts or moneys other than earnings to the Defendant in Attachment? ☐ **YES** ☐ **NO**
- b. If **YES to question a**, list all items of personal property and their location(s) and/or describe the nature and amount of the debt or obligation: (Attach additional pages if necessary): _____

- c. Do you claim any setoff against any property, debt or obligation listed above? ☐ **YES** ☐ **NO**
- d. If you answered **YES** to question c, describe the nature and amount of the setoff claimed:
 (Attach additional pages if necessary): _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

Name of Garnishee (Print) _____

Subscribed under oath before me on _____ (date) Address: _____

Phone Number: _____

 Notary Public Name of Person Answering (Print) _____

My Commission Expires: _____ Signature of Person Answering _____

RETURN OF SERVICE

Defendant in Attachment's Name: _____ **Case Number:** _____

I declare under oath that I am 18 years or older and not a party to the action and have served a copy of this Writ of Garnishment on _____ (name of party) in _____ (County) _____ (State) on _____ (date) _____ (time) at the following location:

By (Check one):

- ☐ By handing it to a person identified to me as _____ (name of garnishee).
- ☐ By leaving it with _____ (Type or write name legibly), who is designated to receive service because of a legal relationship with _____ (name of garnishee) as provided for in C.R.C.P. 4(e).
- ☐ I attempted to serve _____ (name of garnishee) on _____ occasions but have not been able to locate him/her/it. Return to the Judgment Creditor is made on _____ (date).
- ☐ I attempted to leave it with _____ (name of person) who refused service.

☐ Private process server _____

☐ Sheriff, _____ County _____ Signature of Process Server _____

Fee \$ _____ Mileage \$ _____

_____ Name (Print or type)

Subscribed and affirmed, or sworn to before me in the County of _____, State of _____, this _____ day of _____, 20____. **Note: Not required for service by a sheriff or deputy.**

My Commission Expires: _____

_____ Notary Public/Clerk

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ Plaintiff(s)/Petitioner(s): _____ v. Defendant(s)/Respondent(s): _____ Attorney or Party without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	 <div style="text-align: center; font-weight: bold;">▲ COURT USE ONLY ▲</div> Case Number: _____ Division _____ Courtroom _____
WRIT OF GARNISHMENT IN AID OF WRIT OF ATTACHMENT	

Defendant in Attachment's name, last known address, other identifying information: _____

- | | | |
|---|------|--|
| 1. Original Amount of Claim | \$ | |
| 2. Plus any Interest Due on Claim (currently _____ % per annum from _____ (date)) | + | |
| | \$ | |
| 3. Taxable Costs (including estimated cost of service of this Writ) | + \$ | |
| 4. Less any Amount Paid | - \$ | |
| 5. Principal Balance/Total Amount Due and Owing | = \$ | |

I affirm under penalty of perjury that I am authorized to act for the Plaintiff in Attachment and this is a true and correct statement as of _____ (date).

 Print Plaintiff in Attachment's Name
 Address: _____

 By: _____
 Signature (Type Name, Title, Address and Phone)

WRIT OF GARNISHMENT

THE PEOPLE OF THE STATE OF COLORADO to the Sheriff of any Colorado County or to any person 18 years or older and not a party to this action:

You are directed to serve a copy of this Writ of Garnishment upon _____, Garnishee, with proper return of service to be made to the Court.

TO THE GARNISHEE:

YOU ARE HEREBY SUMMONED AS GARNISHEE IN THIS ACTION AND ORDERED:

- a. To answer the following questions under oath and file your answers with the Clerk of the Court (**AND** to mail a completed copy with your answer to the Plaintiff in Attachment or attorney when a stamped envelope is attached) within 14 days following service of this Writ upon you. **YOUR FAILURE TO ANSWER THIS WRIT MAY RESULT IN THE ENTRY OF A DEFAULT AGAINST YOU.**
- b. To hold pending court order any personal property (other than earnings of a natural person) owed to or owned by the Defendant in Attachment and in your possession or control on the date and time this Writ was served upon you.

YOU ARE NOTIFIED:

- a. This Writ applies to all personal property (other than earnings of a natural person) owed to or owned by the Defendant in Attachment and in your possession or control as of the date and time this Writ was served upon you.

b. In no case may you withhold any personal property greater than the amount on Line 5 on the front of this Writ unless the personal property is incapable of being divided.

c. If you are ordered to pay funds to the Court, tender your check for the amount ordered **PAYABLE TO THE CLERK OF THE**
_____ **COURT AT** _____, **CO** _____

CLERK OF THE COURT

By Deputy Clerk: _____

Date: _____

QUESTIONS TO BE ANSWERED BY GARNISHEE

Defendant in Attachment's Name: _____ **Case Number:** _____

The following questions **MUST** be answered by you under oath:

a. On the date and time this Writ was served upon you, did you possess or control any personal property of the Defendant in Attachment or did you owe any rents, payments, obligations, debts or moneys other than earnings to the Defendant in Attachment? ☐ **YES** ☐ **NO**

b. If **YES** to question a, list all items of personal property and their location(s) and/or describe the nature and amount of the debt or obligation: (Attach additional pages if necessary): _____

c. Do you claim any setoff against any property, debt or obligation listed above? ☐ **YES** ☐ **NO**

d. If you answered **YES** to question c, describe the nature and amount of the setoff claimed:

(Attach additional pages if necessary): _____

I affirm that I am authorized to act for the Garnishee and the above answers are true and correct.

Name of Garnishee (Print) _____

Subscribed under oath before me on _____ (date) Address: _____

Phone Number: _____

Notary Public Name of Person Answering (Print) _____

My Commission Expires: _____ Signature of Person Answering _____

Rule 17. Parties Plaintiff and Defendant; Capacity

(a) [NO CHANGE]

(b) Capacity to Sue or Be Sued. ~~A married woman may sue and be sued in all matters the same as though she were sole.~~ A partnership or other unincorporated association may sue or be sued in its common name for the purpose of enforcing for or against it a substantive right. A father and mother or the sole surviving parent may maintain an action for the injury or death of a child; where both maintain the action, each shall have an equal interest in the judgment; where one has deserted or refuses to sue, the other may maintain the action. A guardian may maintain an action for the injury or death of his ward.

(c) [NO CHANGE]

Rule 17. Parties Plaintiff and Defendant; Capacity

(a) [NO CHANGE]

(b) Capacity to Sue or Be Sued. A partnership or other unincorporated association may sue or be sued in its common name for the purpose of enforcing for or against it a substantive right. A father and mother or the sole surviving parent may maintain an action for the injury or death of a child; where both maintain the action, each shall have an equal interest in the judgment; where one has deserted or refuses to sue, the other may maintain the action. A guardian may maintain an action for the injury or death of his ward.

(c) [NO CHANGE]

Rule 41. Dismissal of Actions

(a) [NO CHANGE]

(b) Involuntary Dismissal: Effect Thereof.

(1) By Defendant. For failure of a plaintiff to prosecute or to comply with these Rules or any order of court, a defendant may move for dismissal of an action or of any claim against him. After the plaintiff, in an action tried by the court without a jury, has completed the presentation of his evidence, the defendant, without waiving his right to offer evidence in the event the motion is not granted, may move for a dismissal on the ground that upon the facts and the law the plaintiff has shown no right to relief. The court as trier of the facts may then determine them and render judgment against the plaintiff or may decline to render judgment until the close of all the evidence. If the court renders judgment on the merits against the plaintiff, the court shall make findings as provided in Rule 52(a). Unless the court in its order for dismissal otherwise specifies, a dismissal under this section (b) and any dismissal not provided for in this Rule, other than a dismissal for failure to prosecute, for lack of jurisdiction, for failure to file a complaint under Rule 3, or for failure to join a party under Rule 19, operates as an adjudication upon the merits.

(c) – (d) [NO CHANGE]

Rule 41. Dismissal of Actions

(a) [NO CHANGE]

(b) Involuntary Dismissal: Effect Thereof.

(1) By Defendant. For failure of a plaintiff to prosecute or to comply with these Rules or any order of court, a defendant may move for dismissal of an action or of any claim against him. After the plaintiff, in an action tried by the court without a jury, has completed the presentation of his evidence, the defendant, without waiving his right to offer evidence in the event the motion is not granted, may move for a dismissal on the ground that upon the facts and the law the plaintiff has shown no right to relief. The court as trier of the facts may then determine them and render judgment against the plaintiff or may decline to render judgment until the close of all the evidence. If the court renders judgment on the merits against the plaintiff, the court shall make findings as provided in Rule 52. Unless the court in its order for dismissal otherwise specifies, a dismissal under this section (b) and any dismissal not provided for in this Rule, other than a dismissal for failure to prosecute, for lack of jurisdiction, for failure to file a complaint under Rule 3, or for failure to join a party under Rule 19, operates as an adjudication upon the merits.

(c) – (d) [NO CHANGE]

Rule 60. Relief from Judgment or Order

(a) [NO CHANGE]

(b) Mistakes; Inadvertence; Surprise; Excusable Neglect; Fraud; etc. On motion and upon such terms as are just, the court may relieve a party or his legal representative from a final judgment, order, or proceeding for the following reasons: (1) Mistake, inadvertence, surprise, or excusable neglect; (2) fraud (whether heretofore denominated intrinsic or extrinsic), misrepresentation, or other misconduct of an adverse party; (3) the judgment is void; (4) the judgment has been satisfied, released, or discharged, or a prior judgment upon which it is based has been reversed or otherwise vacated, or it is no longer equitable that the judgment should have prospective application; or (5) any other reason justifying relief from the operation of the judgment. The motion shall be made within a reasonable time, and for reasons (1) and (2) not more than 182 days ~~six months~~ after the judgment, order, or proceeding was entered or taken. A motion under this section (b) does not affect the finality of a judgment or suspend its operation. This Rule does not limit the power of a court: (1) To entertain an independent action to relieve a party from a judgment, order, or proceeding, or (2) to set aside a judgment for fraud upon the court; or (3) when, for any cause, the summons in an action has not been personally served within or without the state on the defendant, to allow, on such terms as may be just, such defendant, or his legal representatives, at any time within 182 days ~~six months~~ after the rendition of any judgment in such action, to answer to the merits of the original action. Writs of coram nobis, audita querela, and bills of review and bills in the nature of a bill of review, are abolished, and the procedure for obtaining any relief from a judgment shall be by motion as prescribed in these rules or by an independent action.

Rule 60. Relief from Judgment or Order

(a) [NO CHANGE]

(b) Mistakes; Inadvertence; Surprise; Excusable Neglect; Fraud; etc. On motion and upon such terms as are just, the court may relieve a party or his legal representative from a final judgment, order, or proceeding for the following reasons: (1) Mistake, inadvertence, surprise, or excusable neglect; (2) fraud (whether heretofore denominated intrinsic or extrinsic), misrepresentation, or other misconduct of an adverse party; (3) the judgment is void; (4) the judgment has been satisfied, released, or discharged, or a prior judgment upon which it is based has been reversed or otherwise vacated, or it is no longer equitable that the judgment should have prospective application; or (5) any other reason justifying relief from the operation of the judgment. The motion shall be made within a reasonable time, and for reasons (1) and (2) not more than 182 days after the judgment, order, or proceeding was entered or taken. A motion under this section (b) does not affect the finality of a judgment or suspend its operation. This Rule does not limit the power of a court: (1) To entertain an independent action to relieve a party from a judgment, order, or proceeding, or (2) to set aside a judgment for fraud upon the court; or (3) when, for any cause, the summons in an action has not been personally served within or without the state on the defendant, to allow, on such terms as may be just, such defendant, or his legal representatives, at any time within 182 days after the rendition of any judgment in such action, to answer to the merits of the original action. Writs of coram nobis, audita querela, and bills of review and bills in the nature of a bill of review, are abolished, and the procedure for obtaining any relief from a judgment shall be by motion as prescribed in these rules or by an independent action.

Rule 121. Local rules – Statewide Practice Standards

(a) – (c) [NO CHANGE]

Section 1-1 to 1-13 [NO CHANGE]

Section 1-14 DEFAULT JUDGMENTS

1. – 2. [NO CHANGE]

3. If the party against whom default judgment is sought is in the military service, or his status cannot be shown, the court shall require such additional evidence or proceeding as will protect the interests of such party in accordance with the Service-Members Civil Relief Act (SCRA), 50 U.S.C. § ~~3931~~⁵²⁰, including the appointment of an attorney when necessary. The appointment of an attorney shall be made upon application of the moving party, and expense of such appointment shall be borne by the moving party, but taxable as costs awarded to the moving party as part of the judgment except as prohibited by law.

4. [NO CHANGE]

~~COMMITTEE~~ COMMENT

2006

This Practice Standard was needed because neither C.R.C.P. 55, nor any local rule specified the elements necessary to obtain a default judgment and each court was left to determine what was necessary. One faced with the task of attempting to obtain a default judgment usually found themselves making several trips to the courthouse, numerous phone calls and redoing needed documents several times. The Practice Standard is designed to minimize both court and attorney time. The Practice Standard sets forth a standardized check list which designates particular items needed for obtaining a default judgment. For guidance on affidavits, see C.R.C.P. 108. See also Sections 13-63-101, C.R.S., concerning affidavits and requirements by the court.

Section 1-15 to 1-18 [NO CHANGE]

Section 1-19 JURY INSTRUCTIONS

Jury instructions shall be prepared and tendered to the court pursuant to C.R.C.P. 16(g~~e~~).

~~COMMITTEE~~ COMMENT

1983

This Standard makes preparation and timing of submission of jury instructions uniform throughout the state. It reasonably assures preparation of instructions and verdict forms before commencement of trial, but retains some needed flexibility in their final form. To permit use of preprepared forms, save time and expense, and to facilitate last-moment revision, the Standard mandates use of photocopies rather than typed originals for submission to the jury.

Section 1-20 to 1-22 [NO CHANGE]

Section 1-23 BONDS IN CIVIL MATTERS

1 – 6. [NO CHANGE]

7. **Bonding over a Lien.** If a money judgment has been made a lien upon real estate by the filing of a transcript of the judgment record by the judgment creditor, the lien shall be released upon the motion of the judgment debtor or other interested party if a bond for the money judgment has been approved and filed as provided in this section 1-23. The order of the court releasing the lien may be recorded with the clerk and recorder of the county where the property is located. Once the order is recorded, all proceedings by the judgment creditor to enforce the judgment lien shall be discontinued, unless a court orders otherwise.

~~COMMITTEE~~ COMMENTS

2006

[1] The Committee is aware that issues have arisen regarding the effective date of a bond, and thus the effectiveness of injunction orders and other orders which are conditioned upon the filing of an acceptable bond. Certain types of bonds are almost always acceptable and thus, under this rule, are automatically effective upon filing with the Court subject to the consideration of timely filed objections. Other types of bonds may or may not be acceptable and should not be effective until the Court determines the sufficiency of the bond. The court may permit property bonds upon such conditions as are appropriate to protect the judgment creditor (or other party sought to

be protected). Such conditions may include an appraisal by a qualified appraiser, information regarding liens and encumbrances against the property, and title insurance.

[2] This rule also sets the presumptive amount of a supersedeas bond for a money judgment. The amount of a supersedeas bond for a non-money judgment must be determined in the particular case by the court and this rule is not intended to affect the court's discretion to deny a supersedeas bond in the case of a non-money judgment.

Section 1-26 ELECTRONIC FILING AND SERVICE SYSTEM

1. – 15. [NO CHANGE]

~~COMMITTEE~~ COMMENTS

2000

[1] C.R.C.P. 77 provides that courts are always open for business. This Practice Standard is intended to comport with that rule.

2013

[2] The Court authorized service provider for the program is the Integrated Colorado Courts E-Filing System (www.jbits.courts.state.co.us/icces/). “Editable Format” is one which is subject to modification by the court using standard means such as Word or WordPerfect format.

2017

[3] Effective November 1, 2016, the name of the court authorized service provider changed from the “Integrated Colorado Courts E-Filing System” to “Colorado Courts E-Filing” (www.jbits.courts.state.co.us/efiling/).

Rule 121. Local rules – Statewide Practice Standards

(a) – (c) [NO CHANGE]

Section 1-1 to 1-13 [NO CHANGE]

Section 1-14 DEFAULT JUDGMENTS

1. – 2. [NO CHANGE]

3. If the party against whom default judgment is sought is in the military service, or his status cannot be shown, the court shall require such additional evidence or proceeding as will protect the interests of such party in accordance with the Servicemembers Civil Relief Act (SCRA), 50 U.S.C. § 3931, including the appointment of an attorney when necessary. The appointment of an attorney shall be made upon application of the moving party, and expense of such appointment shall be borne by the moving party, but taxable as costs awarded to the moving party as part of the judgment except as prohibited by law.

4. [NO CHANGE]

COMMENT

2006

This Practice Standard was needed because neither C.R.C.P. 55, nor any local rule specified the elements necessary to obtain a default judgment and each court was left to determine what was necessary. One faced with the task of attempting to obtain a default judgment usually found themselves making several trips to the courthouse, numerous phone calls and redoing needed documents several times. The Practice Standard is designed to minimize both court and attorney time. The Practice Standard sets forth a standardized check list which designates particular items needed for obtaining a default judgment. For guidance on affidavits, see C.R.C.P. 108. See also Sections 13-63-101, C.R.S., concerning affidavits and requirements by the court.

Section 1-15 to 1-18 [NO CHANGE]

Section 1-19
JURY INSTRUCTIONS

Jury instructions shall be prepared and tendered to the court pursuant to C.R.C.P. 16(g).

COMMENT

1983

This Standard makes preparation and timing of submission of jury instructions uniform throughout the state. It reasonably assures preparation of instructions and verdict forms before commencement of trial, but retains some needed flexibility in their final form. To permit use of preprepared forms, save time and expense, and to facilitate last-moment revision, the Standard mandates use of photocopies rather than typed originals for submission to the jury.

Section 1-20 to 1-22 [NO CHANGE]

Section 1-23
BONDS IN CIVIL MATTERS

1 – 6. [NO CHANGE]

7. **Bonding over a Lien.** If a money judgment has been made a lien upon real estate by the filing of a transcript of the judgment record by the judgment creditor, the lien shall be released upon the motion of the judgment debtor or other interested party if a bond for the money judgment has been approved and filed as provided in this section 1-23. The order of the court releasing the lien may be recorded with the clerk and recorder of the county where the property is located. Once the order is recorded, all proceedings by the judgment creditor to enforce the judgment lien shall be discontinued, unless a court orders otherwise.

COMMENTS

2006

[1] The Committee is aware that issues have arisen regarding the effective date of a bond, and thus the effectiveness of injunction orders and other orders which are conditioned upon the filing of an acceptable bond. Certain types of bonds are almost always acceptable and thus, under this rule, are automatically effective upon filing with the Court subject to the consideration of timely filed objections. Other types of bonds may or may not be acceptable and should not be effective until the Court determines the sufficiency of the bond. The court may permit property bonds upon such conditions as are appropriate to protect the judgment creditor (or other party sought to

be protected). Such conditions may include an appraisal by a qualified appraiser, information regarding liens and encumbrances against the property, and title insurance.

[2] This rule also sets the presumptive amount of a supersedeas bond for a money judgment. The amount of a supersedeas bond for a non-money judgment must be determined in the particular case by the court and this rule is not intended to affect the court's discretion to deny a supersedeas bond in the case of a non-money judgment.

Section 1-26 ELECTRONIC FILING AND SERVICE SYSTEM

1. – 15. [NO CHANGE]

COMMENTS

2000

[1] C.R.C.P. 77 provides that courts are always open for business. This Practice Standard is intended to comport with that rule.

2013

[2] The Court authorized service provider for the program is the Integrated Colorado Courts E-Filing System (www.jbits.courts.state.co.us/icces/). “Editable Format” is one which is subject to modification by the court using standard means such as Word or WordPerfect format.

2017

[3] Effective November 1, 2016, the name of the court authorized service provider changed from the “Integrated Colorado Courts E-Filing System” to “Colorado Courts E-Filing” (www.jbits.courts.state.co.us/efiling/).

Rule 305.5. Electronic Filing and Serving

(a) – (q) [NO CHANGE]

~~COMMITTEE~~ COMMENTS

2009

[1] The Court authorized service provider for the program is the Integrated Colorado Courts E-Filing System (www.jbits.courts.state.co.us/icces/).

[2] “Editable Format” is one which is subject to modification by the court using standard means such as Word or WordPerfect format.

[3] C.R.C.P. 377 provides that courts are always open for business. This Rule 305.5 is intended to comport with that rule.

2017

[4] Effective November 1, 2016, the name of the court authorized service provider changed from the “Integrated Colorado Courts E-Filing System” to “Colorado Courts E-Filing” (www.jbits.courts.state.co.us/efiling/).

Rule 305.5. Electronic Filing and Serving

(a) – (q) [NO CHANGE]

COMMENTS

2009

[1] The Court authorized service provider for the program is the Integrated Colorado Courts E-Filing System (www.jbits.courts.state.co.us/icces/).

[2] “Editable Format” is one which is subject to modification by the court using standard means such as Word or WordPerfect format.

[3] C.R.C.P. 377 provides that courts are always open for business. This Rule 305.5 is intended to comport with that rule.

2017

[4] Effective November 1, 2016, the name of the court authorized service provider changed from the “Integrated Colorado Courts E-Filing System” to “Colorado Courts E-Filing” (www.jbits.courts.state.co.us/efiling/).

Rule 122. Case Specific Appointment of Appointed Judges Pursuant to C.R.S. §13-3-111

(a) – (b) [NO CHANGE]

(c) Motion for Appointment. A request for the appointment of an Appointed Judge shall be made by a joint motion filed by all parties to a case and shall be signed as approved by the Appointed Judge. The original of such motion shall be filed with the Supreme Court with a copy filed in the originating court--the court of record in which the case was originally filed. Such motion shall include:

| (1) The name, address, and registration number of the Appointed Judge;

(2) – (6) [NO CHANGE]

| (7) A copy signed by the Appointed Judge of the following oath: “I, (name of Appointed Judge), do solemnly swear or affirm ~~by the ever living God,~~ that I will support the Constitution of the United States and of the State of Colorado, and faithfully perform the duties of the office upon which I am about to enter.”

(8) – (10) [NO CHANGE]

(d) – (k) [NO CHANGE]

Rule 122. Case Specific Appointment of Appointed Judges Pursuant to C.R.S. §13-3-111

(a) – (b) [NO CHANGE]

(c) Motion for Appointment. A request for the appointment of an Appointed Judge shall be made by a joint motion filed by all parties to a case and shall be signed as approved by the Appointed Judge. The original of such motion shall be filed with the Supreme Court with a copy filed in the originating court--the court of record in which the case was originally filed. Such motion shall include:

(1) The name, address, and registration number of the Appointed Judge;

(2) – (6) [NO CHANGE]

(7) A copy signed by the Appointed Judge of the following oath: “I, (name of Appointed Judge), do solemnly swear or affirm that I will support the Constitution of the United States and of the State of Colorado, and faithfully perform the duties of the office upon which I am about to enter.”

(8) – (10) [NO CHANGE]

(d) – (k) [NO CHANGE]

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> In re: <input type="checkbox"/> The Marriage of: <input type="checkbox"/> The Civil Union of: <input type="checkbox"/> Parental Responsibilities concerning: _____ <hr/> Petitioner: _____ and Co-Petitioner/Respondent: _____	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
SWORN FINANCIAL STATEMENT	

I, _____ (full name) ☐ am ☐ am not currently employed.

I am employed _____ hours per week. I am paid ☐ weekly ☐ bi-weekly ☐ twice a month ☐ monthly.

My pay is based on a ☐ Monthly Salary ☐ Hourly rate of \$ _____ ☐ Other: _____

Date employment began _____.

My occupation is: _____ Name of employer: _____

Address of employer: _____

If unemployed, what date did you last work? _____

I am unemployed due to ☐ disability ☐ involuntary layoff at work ☐ other: _____

This household consists of _____ adult(s), and _____ minor child(ren).

I believe the monthly gross income of the other party is \$ _____.

Annual gross income (last tax year 20__) for Petitioner \$ _____, ☐ Co-Petitioner/Respondent \$ _____

1. Monthly Income (Convert annual, bi-monthly, and weekly amounts to monthly amounts.)

Gross Monthly Income (before taxes and deductions) from salary and wages, including commissions, bonuses, overtime, self-employment, business income, other jobs, and monthly reimbursed expenses.	\$	Social Security Benefits (SSA) <input type="checkbox"/> SSDI (Disability insurance – entitlement program) <input type="checkbox"/> SSI (supplemental income – need based)	\$
Unemployment & Veterans' Benefits		Disability, Workers' Compensation	
Pension & Retirement Benefits		Interest & Dividends	
Public Assistance (TANF)		Other - _____	
Total Monthly Income			\$
Miscellaneous Income			
Royalties, Trusts, and Other Investments	\$	Contributions from Others	\$
Dependent Children's monthly gross income. Source of Income: _____		All other sources, i.e. personal injury settlement, non-reported income, etc.	
Rental Net Income		Expense Accounts	
Child Support from Others		Other - _____	
Spousal/Partner Support from Others		Other - _____	
Total Monthly Miscellaneous Income			\$
Total Income			\$

2. Monthly Deductions (Mandatory and Voluntary)

Mandatory Deductions	Cost Per Month		Cost Per Month
Federal Income Tax	\$	State/Local Income Tax	\$
PERA/Civil Service		Social Security Tax	
Medicare Tax		Other - _____	
Total Mandatory Deductions			\$
Voluntary Deductions	Cost Per Month		Cost Per Month
Life and Disability Insurance	\$	Stocks/Bonds	\$
Health, Dental, Vision Insurance Premium		Retirement & Deferred Compensation	
Total number of people covered on Plan →			
Child Care (deducted from salary)		Other - _____	
Flex Benefit Cafeteria Plan		Other - _____	
Total Voluntary Deductions			\$
Total Monthly Deductions			\$

3. Monthly Expenses

Note: List regular monthly expenses below that you pay on an on-going basis and that are not identified in the deductions above.

A. Housing

	Cost Per Month		Cost Per Month
1 st Mortgage	\$	2 nd Mortgage	\$
Insurance (Home/Rental) & Property Taxes (not included in mortgage payment)		Condo/Homeowner's/Maintenance Fees	
Rent		Other - _____	
Total Housing			\$

B. Utilities and Miscellaneous Housing Services

	Cost Per Month		Cost Per Month
Gas & Electricity	\$	Water, Sewer, Trash Removal	\$
Telephone (local, long distance, cellular & pager)		Property Care (Lawn, snow removal, cleaning, security system, etc.)	
Internet Provider, Cable & Satellite TV		Other - _____	
Total Utilities and Miscellaneous Housing Services			\$

C. Food & Supplies

	Cost Per Month		Cost Per Month
Groceries & Supplies	\$	Dining Out	\$
Total Food & Supplies			\$

D. Health Care Costs (Co-pays, Premiums, etc.)

	Cost Per Month		Cost Per Month
Doctor & Vision Care	\$	Dentist and Orthodontist	\$
Medicine & RX Drugs		Therapist	
Premiums (if not paid by employer)		Other - _____	
Total Health Care			\$

E. Transportation & Recreation Vehicles (Motorcycles, Motor Homes, Boats, ATV, Snowmobiles, etc.)

	Cost Per Month		Cost Per Month
Primary Vehicle Payment	\$	Other Vehicle Payments	\$
Fuel, Parking, and Maintenance		Insurance & Registration/Tax Payments (yearly amount(s) ÷ 12)	
Bus & Commuter Fees		Other -	
Total Transportation			\$

F. Children's Expenses and Activities

	Cost Per Month		Cost Per Month
Clothing & Shoes	\$	Child Care	\$
Extraordinary Expenses i.e. Special Needs, etc.		Misc. Expenses, i.e. Tutor, Books, Activities, Fees, Lunch, etc.	
Tuition		Other -	
Total Children's Expenses and Activities			\$

G. Education for you - Please identify status: ☐ Full-time student ☐ Part-time student

	Cost Per Month		Cost Per Month
Tuition, Books, Supplies, Fees, etc.		Other -	
Total Education			\$

H. Maintenance (Spousal/Partner Support) & Child Support (that you pay)

	Cost Per Month		Cost Per Month
Maintenance		Child Support	
<input type="checkbox"/> This family	\$	<input type="checkbox"/> This family	\$
<input type="checkbox"/> Other family		<input type="checkbox"/> Other family	
Total Maintenance and Child Support			\$

I. Miscellaneous (Please list on-going expenses not covered in the sections above)

	Cost Per Month		Cost Per Month
Recreation/Entertainment	\$	Personal Care (Hair, Nail, Clothing, etc.)	\$
Legal/Accounting Fees		Subscriptions (Newspapers, Magazines, etc.)	
Charity/Worship		Movie & Video Rentals	
Vacation/Travel/Hobbies		Investments (Not part of payroll deductions)	
Membership/Clubs		Home Furnishings	
Pets/Pet Care		Sports Events/Participation	
Other -		Other -	
Other -		Other -	
Other -		Other -	
Other -		Other -	
Total Miscellaneous			\$

Total Monthly Expenses (Totals from A – I)			\$
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4. Debts (unsecured)

List unsecured debts such as credit cards, store charge accounts, loans from family members, back taxes owed to the I.R.S., etc. **Do not** list debts that are liens against your property, such as mortgages and car loans, because that payment is already listed as an expense above, and the total of the debt is shown elsewhere as a deduction from value where that asset is listed, such as under Real Estate or Motor Vehicles.

For name on account, "P" = Petitioner, "C/R" = Co-Petitioner or Respondent, "J" = Joint.

Name of Creditor	Account Number (last 4-digits only)	P	C/R	J	Date of Balance	Balance	Minimum Monthly Payment Required	Reason for Which Debt was Incurred
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$	\$	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Unsecured Debt Balance						\$	\$	→Total Minimum Monthly Payment

SWORN FINANCIAL STATEMENT SUMMARY (INCOME/EXPENSES)

Total Income (from Page 1)	\$ _____	A
Total Monthly Deductions (from Page 2)	\$ _____	B
Total Monthly Net Income (A minus B)	\$ _____	
Total Monthly Expenses (from Page 3)	\$ _____	C
Total Minimum Monthly Payment Required - Debts Unsecured (from Page 4)	\$ _____	D
Total Monthly Expenses and Payments (C plus D)	\$ _____	

Net Excess or Shortfall (Monthly Net Income less Monthly Expenses and Payments)	(+/-)	\$ _____
--	--------------	----------

5. Assets

You **MUST** disclose all assets correctly. By indicating "None", you are stating affirmatively that you or the other party, do not have assets in that category. Please attach additional copies of pages 5 & 6 to identify your assets, if necessary.

If the parties are married or partners in a civil union, check under the heading Joint (J) all assets acquired during the marriage/civil union but not by gift or inheritance. Under the headings of Petitioner (P) or Co-Petitioner/Respondent (C/R), check assets owned before this marriage/civil union and assets acquired by gift or inheritance.

If the parties were NEVER married to each other or are using this form to modify child support, list all of each party's assets under the headings of Petitioner (P) or Co-Petitioner/Respondent (C/R).

"P" = Petitioner, "C/R" = Co-Petitioner or Respondent, "J" = Joint.

A. Real Estate (Address or Property Description and Name of Creditor/ Lender) <input type="checkbox"/> None	P	C/R	J	Estimated Value as of Today Value = what you could sell it for in its current condition.	Amount Owed	Net Value/Equity (Value minus amount owed)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total				\$	\$	\$

B. Motor Vehicles & Recreation Vehicles Including Motorcycles, ATV's, Boats, etc.) (Year, Make, Model) (Name of Creditor/Lender) <input type="checkbox"/> None	P	C/R	J	Estimated Value as of Today Value = what you could sell it for in its current condition.	Amount Owed	Net Value/Equity (Value minus amount owed)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total				\$	\$	\$

C. Cash on Hand, Bank, Checking, Savings, or Health Accounts (Name of Bank or Financial Institution) <input type="checkbox"/> None	P	C/R	J	Type of Account	Account # (last 4-digits only)	Balance as of Today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total						\$

D. Life Insurance (Name of Company/Beneficiary) <input type="checkbox"/> None	P	C/R	J	Type of Policy	Face Amount of Policy	Cash Value today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total				\$	\$

E. Furniture, Household Goods, and Other Personal Property, i.e. Jewelry, Antiques, Collectibles, Artwork, Power Tools, etc. Identify Items and report in total. <input type="checkbox"/> None	P	C/R	J	Current Possession Held by			Estimated Value as of Today Value = what you could sell it for in its current condition.
				P	C/R	J	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total							\$

F. Stocks, Bonds, Mutual Funds, Securities & Investment Accounts <input type="checkbox"/> None <input type="checkbox"/> If owned please attach JDF 1111-SS.	Total	\$
G. Pension, Profit Sharing, or Retirement Funds <input type="checkbox"/> None <input type="checkbox"/> If owned please attach JDF 1111-SS.	Total	\$

H. Miscellaneous Assets <input type="checkbox"/> None If you own any of the assets identified below, please check the appropriate box and attach JDF 1111-SS to report the value.			
<input type="checkbox"/> Business Interests	<input type="checkbox"/> Stock Options	<input type="checkbox"/> Money/Loans owed to you	<input type="checkbox"/> IRS Refunds due to you
<input type="checkbox"/> Country Club & Other Memberships	<input type="checkbox"/> Livestock, Crops, Farm Equipment	<input type="checkbox"/> Pending lawsuit or claim by you	<input type="checkbox"/> Accrued Paid Leave (sick, vacation, personal)
<input type="checkbox"/> Oil and Gas Rights	<input type="checkbox"/> Vacation Club Points	<input type="checkbox"/> Safety Deposit Box/Vault	<input type="checkbox"/> Trust Beneficiary
<input type="checkbox"/> Frequent Flyer Miles	<input type="checkbox"/> Education Accounts	<input type="checkbox"/> Health Savings Accounts	<input type="checkbox"/> Mineral and Water Rights
<input type="checkbox"/> Other - _____	<input type="checkbox"/> Other - _____	<input type="checkbox"/> Other - _____	<input type="checkbox"/> Other - _____
Total			\$

I. Separate Property <input type="checkbox"/> None <input type="checkbox"/> If owned please attach JDF 1111-SS to identify the property and to report the value.	Total	\$
--	--------------	----

Total Value/Balance of All Assets (A – I)	\$
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I swear or affirm under oath that this Sworn Financial Statement, attached schedules, and mandatory disclosures contain a complete disclosure of my income, expenses, assets, and debt as of the date of my signature.

I understand that if the information I have provided changes or needs to be updated before a final decree or order is issued by the Court, that I have a duty to provide the correct or updated information.

I understand that this oath is made under penalty of perjury. I understand that if I have omitted or misstated any material information, intentionally or not, the Court will have the power to enter orders to

address those matters, including the power to punish me for any statements made with the intent to defraud or mislead the Court or the other party.

Date: _____

Signature of ☐ Petitioner or ☐ Co-Petitioner/Respondent

Subscribed and affirmed, or sworn to before me in the
County of _____, State of _____,
this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public/Deputy Clerk

CERTIFICATE OF SERVICE

~~To be completed if the Sworn Financial Statement is not being filed with
JDF 1104 – Certificate of Compliance with Mandatory Financial Disclosures~~

I certify that on _____ (date) a true and accurate copy of the **SWORN FINANCIAL STATEMENT** was served on the other party by:

- ☐ Hand Delivery, ☐ E-filed, ☐ Faxed to this number: _____, or
☐ By placing it in the United States mail, postage pre-paid, and addressed to the following:

To: _____

Your signature

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> In re: <input type="checkbox"/> The Marriage of: <input type="checkbox"/> The Civil Union of: <input type="checkbox"/> Parental Responsibilities concerning: _____ <hr/> Petitioner: and Co-Petitioner/Respondent: _____	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
SWORN FINANCIAL STATEMENT	

I, _____ (full name) ☐ am ☐ am not currently employed.

I am employed _____ hours per week. I am paid ☐ weekly ☐ bi-weekly ☐ twice a month ☐ monthly.

My pay is based on a ☐ Monthly Salary ☐ Hourly rate of \$ _____ ☐ Other: _____

Date employment began _____.

My occupation is: _____ Name of employer: _____

Address of employer: _____

If unemployed, what date did you last work? _____

I am unemployed due to ☐ disability ☐ involuntary layoff at work ☐ other: _____

This household consists of _____ adult(s), and _____ minor child(ren).

I believe the monthly gross income of the other party is \$ _____.

Annual gross income (last tax year 20__) for Petitioner \$ _____, ☐ Co-Petitioner/Respondent \$ _____

1. Monthly Income (Convert annual, bi-monthly, and weekly amounts to monthly amounts.)

Gross Monthly Income (before taxes and deductions) from salary and wages, including commissions, bonuses, overtime, self-employment, business income, other jobs, and monthly reimbursed expenses.	\$	Social Security Benefits (SSA) <input type="checkbox"/> SSDI (Disability insurance – entitlement program) <input type="checkbox"/> SSI (supplemental income – need based)	\$
Unemployment & Veterans' Benefits		Disability, Workers' Compensation	
Pension & Retirement Benefits		Interest & Dividends	
Public Assistance (TANF)		Other - _____	
Total Monthly Income			\$
Miscellaneous Income			
Royalties, Trusts, and Other Investments	\$	Contributions from Others	\$
Dependent Children's monthly gross income. Source of Income: _____		All other sources, i.e. personal injury settlement, non-reported income, etc.	
Rental Net Income		Expense Accounts	
Child Support from Others		Other - _____	
Spousal/Partner Support from Others		Other - _____	
Total Monthly Miscellaneous Income			\$
Total Income			\$

2. Monthly Deductions (Mandatory and Voluntary)

Mandatory Deductions	Cost Per Month		Cost Per Month
Federal Income Tax	\$	State/Local Income Tax	\$
PERA/Civil Service		Social Security Tax	
Medicare Tax		Other - _____	
Total Mandatory			\$
Deductions			
Voluntary Deductions	Cost Per Month		Cost Per Month
Life and Disability Insurance	\$	Stocks/Bonds	\$
Health, Dental, Vision Insurance Premium		Retirement & Deferred Compensation	
Total number of people covered on Plan →			
Child Care (deducted from salary)		Other - _____	
Flex Benefit Cafeteria Plan		Other - _____	
Total Voluntary			\$
Deductions			
Total Monthly Deductions			\$

3. Monthly Expenses

Note: List regular monthly expenses below that you pay on an on-going basis and that are not identified in the deductions above.

A. Housing

	Cost Per Month		Cost Per Month
1 st Mortgage	\$	2 nd Mortgage	\$
Insurance (Home/Rental) & Property Taxes (not included in mortgage payment)		Condo/Homeowner's/Maintenance Fees	
Rent		Other - _____	
Total			\$
Housing			

B. Utilities and Miscellaneous Housing Services

	Cost Per Month		Cost Per Month
Gas & Electricity	\$	Water, Sewer, Trash Removal	\$
Telephone (local, long distance, cellular & pager)		Property Care (Lawn, snow removal, cleaning, security system, etc.)	
Internet Provider, Cable & Satellite TV		Other - _____	
Total Utilities and Miscellaneous Housing			\$
Services			

C. Food & Supplies

	Cost Per Month		Cost Per Month
Groceries & Supplies	\$	Dining Out	\$
Total Food &			\$
Supplies			

D. Health Care Costs (Co-pays, Premiums, etc.)

	Cost Per Month		Cost Per Month
Doctor & Vision Care	\$	Dentist and Orthodontist	\$
Medicine & RX Drugs		Therapist	
Premiums (if not paid by employer)		Other - _____	
Total Health Care			\$

E. Transportation & Recreation Vehicles (Motorcycles, Motor Homes, Boats, ATV, Snowmobiles, etc.)

	Cost Per Month		Cost Per Month
Primary Vehicle Payment	\$	Other Vehicle Payments	\$
Fuel, Parking, and Maintenance		Insurance & Registration/Tax Payments (yearly amount(s) ÷ 12)	
Bus & Commuter Fees		Other - _____	
Total			\$
Transportation			

F. Children's Expenses and Activities

	Cost Per Month		Cost Per Month
Clothing & Shoes	\$	Child Care	\$
Extraordinary Expenses i.e. Special Needs, etc.		Misc. Expenses, i.e. Tutor, Books, Activities, Fees, Lunch, etc.	
Tuition		Other - _____	
Total Children's Expenses and Activities			\$

G. Education for you - Please identify status: ☐ Full-time student ☐ Part-time student

	Cost Per Month		Cost Per Month
Tuition, Books, Supplies, Fees, etc.		Other - _____	
Total			\$
Education			

H. Maintenance (Spousal/Partner Support) & Child Support (that you pay)

	Cost Per Month		Cost Per Month
Maintenance		Child Support	
<input type="checkbox"/> This family	\$	<input type="checkbox"/> This family	\$
<input type="checkbox"/> Other family		<input type="checkbox"/> Other family	
Total Maintenance and Child Support			\$

I. Miscellaneous (Please list on-going expenses not covered in the sections above)

	Cost Per Month		Cost Per Month
Recreation/Entertainment	\$	Personal Care (Hair, Nail, Clothing, etc.)	\$
Legal/Accounting Fees		Subscriptions (Newspapers, Magazines, etc.)	
Charity/Worship		Movie & Video Rentals	
Vacation/Travel/Hobbies		Investments (Not part of payroll deductions)	
Membership/Clubs		Home Furnishings	
Pets/Pet Care		Sports Events/Participation	
Other - _____		Other - _____	
Other - _____		Other - _____	
Other - _____		Other - _____	
Other - _____		Other - _____	

	Total Miscellaneous	\$
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I)	Total Monthly Expenses (Totals from A –	\$
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4. Debts (unsecured)

List unsecured debts such as credit cards, store charge accounts, loans from family members, back taxes owed to the I.R.S., etc. **Do not** list debts that are liens against your property, such as mortgages and car loans, because that payment is already listed as an expense above, and the total of the debt is shown elsewhere as a deduction from value where that asset is listed, such as under Real Estate or Motor Vehicles.

For name on account, "P" = Petitioner, "C/R" = Co-Petitioner or Respondent, "J" = Joint.

Name of Creditor	Account Number (last 4-digits only)	P	C/R	J	Date of Balance	Balance	Minimum Monthly Payment Required	Reason for Which Debt was Incurred
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$	\$	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Unsecured Debt Balance						\$	\$	→Total Minimum Monthly Payment

SWORN FINANCIAL STATEMENT SUMMARY (INCOME/EXPENSES)

Total Income (from Page 1)	\$ _____	A
Total Monthly Deductions (from Page 2)	\$ _____	B
Total Monthly Net Income (A minus B)	\$ _____	
Total Monthly Expenses (from Page 3)	\$ _____	C
Total Minimum Monthly Payment Required - Debts Unsecured (from Page 4)	\$ _____	D
Total Monthly Expenses and Payments (C plus D)	\$ _____	

Net Excess or Shortfall (Monthly Net Income less Monthly Expenses and Payments)	(+/-) \$ _____
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5. Assets

You **MUST** disclose all assets correctly. By indicating "None", you are stating affirmatively that you or the other party, do not have assets in that category. Please attach additional copies of pages 5 & 6 to identify your assets, if necessary.

If the parties are married or partners in a civil union, check under the heading Joint (J) all assets acquired during the marriage/civil union but not by gift or inheritance. Under the headings of Petitioner (P) or Co-Petitioner/Respondent (C/R), check assets owned before this marriage/civil union and assets acquired by gift or inheritance.

If the parties were NEVER married to each other or are using this form to modify child support, list all of each party's assets under the headings of Petitioner (P) or Co-Petitioner/Respondent (C/R).

"P" = Petitioner, "C/R" = Co-Petitioner or Respondent, "J" = Joint.

A. Real Estate (Address or Property Description and Name of Creditor/ Lender) <input type="checkbox"/> None	P	C/R	J	Estimated Value as of Today Value = what you could sell it for in its current condition.	Amount Owed	Net Value/Equity (Value minus amount owed)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total				\$	\$	\$

B. Motor Vehicles & Recreation Vehicles Including Motorcycles, ATV's, Boats, etc.) (Year, Make, Model) (Name of Creditor/Lender) <input type="checkbox"/> None	P	C/R	J	Estimated Value as of Today Value = what you could sell it for in its current condition.	Amount Owed	Net Value/Equity (Value minus amount owed)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total				\$	\$	\$

C. Cash on Hand, Bank, Checking, Savings, or Health Accounts (Name of Bank or Financial Institution) <input type="checkbox"/> None	P	C/R	J	Type of Account	Account # (last 4-digits only)	Balance as of Today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total						\$

D. Life Insurance (Name of Company/Beneficiary) <input type="checkbox"/> None	P	C/R	J	Type of Policy	Face Amount of Policy	Cash Value today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Total					\$	\$

E. Furniture, Household Goods, and Other Personal Property, i.e. Jewelry, Antiques, Collectibles, Artwork, Power Tools, etc. Identify Items and report in total. <input type="checkbox"/> None	P	C/R	J	Current Possession Held by			Estimated Value as of Today Value = what you could sell it for in its current condition.
				P	C/R	J	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total							\$

F. Stocks, Bonds, Mutual Funds, Securities & Investment Accounts <input type="checkbox"/> None <input type="checkbox"/> If owned please attach JDF 1111-SS.	Total	\$
G. Pension, Profit Sharing, or Retirement Funds <input type="checkbox"/> None <input type="checkbox"/> If owned please attach JDF 1111-SS.	Total	\$

H. Miscellaneous Assets <input type="checkbox"/> None If you own any of the assets identified below, please check the appropriate box and attach JDF 1111-SS to report the value.			
<input type="checkbox"/> Business Interests	<input type="checkbox"/> Stock Options	<input type="checkbox"/> Money/Loans owed to you	<input type="checkbox"/> IRS Refunds due to you
<input type="checkbox"/> Country Club & Other Memberships	<input type="checkbox"/> Livestock, Crops, Farm Equipment	<input type="checkbox"/> Pending lawsuit or claim by you	<input type="checkbox"/> Accrued Paid Leave (sick, vacation, personal)
<input type="checkbox"/> Oil and Gas Rights	<input type="checkbox"/> Vacation Club Points	<input type="checkbox"/> Safety Deposit Box/Vault	<input type="checkbox"/> Trust Beneficiary
<input type="checkbox"/> Frequent Flyer Miles	<input type="checkbox"/> Education Accounts	<input type="checkbox"/> Health Savings Accounts	<input type="checkbox"/> Mineral and Water Rights
<input type="checkbox"/> Other - _____	<input type="checkbox"/> Other - _____	<input type="checkbox"/> Other - _____	<input type="checkbox"/> Other - _____
Total			\$

I. Separate Property <input type="checkbox"/> None <input type="checkbox"/> If owned please attach JDF 1111-SS to identify the property and to report the value.	Total	\$
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Total Value/Balance of All Assets (A – I)	\$
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I swear or affirm under oath that this Sworn Financial Statement, attached schedules, and mandatory disclosures contain a complete disclosure of my income, expenses, assets, and debt as of the date of my signature.

I understand that if the information I have provided changes or needs to be updated before a final decree or order is issued by the Court, that I have a duty to provide the correct or updated information.

I understand that this oath is made under penalty of perjury. I understand that if I have omitted or misstated any material information, intentionally or not, the Court will have the power to enter orders to address those

matters, including the power to punish me for any statements made with the intent to defraud or mislead the Court or the other party.

Date: _____

Signature of ☐ Petitioner or ☐ Co-Petitioner/Respondent

Subscribed and affirmed, or sworn to before me in the
County of _____, State of _____,
this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public/Deputy Clerk

CERTIFICATE OF SERVICE

I certify that on _____ (date) a true and accurate copy of the **SWORN FINANCIAL STATEMENT** was served on the other party by:

☐ Hand Delivery, ☐ E-filed, ☐ Faxed to this number: _____, or
☐ By placing it in the United States mail, postage pre-paid, and addressed to the following:

To: _____

Your signature

Amended and Adopted by the Court, En Banc, January 12, 2017, effective as stated.

By the Court:

Allison H. Eid
Justice, Colorado Supreme Court