Court .	Address:		County District Court, Colorado							
Petition	ner:									
and										
Respondent:(or co-petitioner)			_	▲ Court Use Only ▲						
My Na	ıme:			Case						
Addres	ss:			Number:						
Phone			Fax:	Division:						
			Atty. Reg.#:	Courtroom:						
			Response to the Petition for	or						
			Dissolution or Legal	Separation						
	of a Civil Union									
1.	Resp	onse								
	Should	d the re	equest in the Petition be granted?							
	Ye	es	□ No*							
		*If no	o, why?							
			Because the civil union is not irretrievably broken.							
			Because:							
2.	Facts	8								
	Were t	the fac	ts mentioned in the Petition correct?							
	☐ Ye	es	□ No*							

	*If no, the correct information is:						
			Attach more pages as you need.				
Indi	ian Child	Welfare Act (ICWA):				
	I am aware of the child or child's relatives having American Indian/Native American						
	or Alaska Native ancestry. Name of tribe(s):						
	Note:	Note: If you checked that you are "aware" of the child or child's relatives having any American Indian/Native American or Alaska Native ancestr you must complete and file with the court, JDF 1350 - ICWA Assessment Form.					
		aware of the child or chiln n or Alaska Native ancest	ld's relatives having any American Indian/Native				
My	Request						
I ask	k that the Court enter orders for/to: Check all that apply						
I	End the Civ	il Union	☐ Maintenance (partner Support)				
_		il Union es and Costs	☐ Maintenance (partner Support)☐ Division of Property and Debts				
		es and Costs					
	Attorney Fed Child Suppo	es and Costs ort	Division of Property and Debts				

5.	Certificate of Service										
	I certify that on (enter date)to the other parties by:	a copy of this document was given y Colorado Courts E-Filing (where available) (www.jbits.courts.state.co.us/efiling)									
	☐ Hand Delivery										
	Email or Fax to:	ior written agreement needed for this method of service.									
	Mail through the United States Postal Service, addressed to:										
6.	Verified Signature										
	I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.										
	Executed on the (date)	day of(month)	, (year)	, at							
	(city or other location,	and state or cou	ntry)								
	Print Your Name:										
	Your Signature:										
	Attorney Signature: (If any)										