| Court Address: | | County, Colorado | | | |
|--|---------------------|---------------------------------|-----------------|---|--|
| Court Address. | | | | | |
| Plaintiff(s)/Petitioner(s): | | | _ | | |
| V. | | | | | |
| Defendant(s)/Respondent(s): | | | | ▲ COURT USE ONLY ▲ | |
| Attorney or Party Without A | ttorney (Name and | d Address): | Case Nu | ımber: | |
| Phone Number: | E-mail: | | Division | Courtroom | |
| FAX Number: | Atty. Re | | Division | | |
| | | ECT TO ASSIGNM ORADO RULES F | _ | | |
| My name is | | . (After read | ding carefully. | check one of the boxes below.) | |
| ☐I am a Plaintiff/Petitioner in | | ☐I am counsel for a | | | |
| | | _ | | | |
| ☐I am a Defendant/Respond ☐ | | | | • | |
| (Attorneys only) I represer | it the following pa | rty or parties: | | | |
| | IM | PORTANT NOTICE | _ | | |
| | ent or Object | for another party u | nless you | separate Consent or Objectare that person's attorney | |
| the case will be handled | (name | of proceeding) in this | case. I unde | gs on all motions or □the rstand that if I do not consent consent, I cannot withdraw my | |
| consent at a later time. | | | | | |
| | (na | me of proceeding) in t | | ılings on all motions or understand that if I object, the | |
| Date: | | | | | |
| Date | | Signature | | ····· | |
| | CERT | IFICATE OF SERV | ICE | | |
| | | | | Court and a true and accurate | |
| copy of the CONSENT TO A | | | | | |
| ⊔напо Delivery, ⊔Е-тіled, States mail, postage pre-paic | | | , o | r □by placing it in the United | |
| To: | | - | | | |
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