

District Court _____ County, Colorado Court Address: _____		▲ COURT USE ONLY ▲
In re the Marriage of: Petitioner: and Co-Petitioner/Respondent:		
Attorney or Party Without Attorney (Name and Address): _____		Case Number: _____
Phone Number: _____	E-mail: _____	Division _____ Courtroom _____
FAX Number: _____	Atty. Reg. #: _____	
PETITION FOR: <input type="checkbox"/> DISSOLUTION OF MARRIAGE <input type="checkbox"/> LEGAL SEPARATION PURSUANT TO § 14-10-106, C.R.S. *****IF CHILDREN ARE PART OF THIS ACTION, PLEASE CHECK HERE <input type="checkbox"/>*****		

1. This Petition is for Dissolution of Marriage or Legal Separation.

2. The Marriage is irretrievably broken.

3. **Information about the Petitioner:** Check if in Military

Full Legal Name: _____ Date of Birth: _____

Length of **Current Residency in Colorado:** _____ (Years/months) Dates: _____

Current Mailing Address: _____ Apt.# _____

City: _____ State: _____ Zip Code: _____ Home Phone #: _____

Email Address: _____ Cell Phone #: _____

4. **Information about the Co-Petitioner/Respondent:** Check if in Military

Full Legal Name: _____ Date of Birth: _____

Length of **Current Residency in Colorado:** _____ (Years/months) Dates: _____

Current Mailing Address: _____ Apt.# _____

City: _____ State: _____ Zip Code: _____ Home Phone #: _____

Email Address: _____ Cell Phone #: _____

5. Date of the Marriage: _____ Place of Marriage: _____ (City/State)

6. Date the parties separated: _____

7. A party to the marriage is presently expecting a child not presently expecting a child

8. The following child(ren) was/were born or adopted of this marriage. (attach a second sheet, if necessary):

Full Name of Child	Present Address	Sex	Date of Birth

9. The child(ren) listed above have lived in Colorado for a minimum of 182 days prior to the filing of this Petition or since birth if under six months of age. Yes No If No, please state the name of child, name of person child lived with and the month, date and year when each child most recently moved to Colorado.

Full Name of Child	Name of Person Child Lived with	State Moved From	Month	Day	Year

10. I/We understand that a request for genetic tests shall not prejudice the requesting party in matters concerning allocation of parental responsibilities pursuant to §14-10-124(1.5), C.R.S. If genetic tests are not obtained prior to a legal establishment of paternity and submitted into evidence prior to the entry of the final decree of dissolution or legal separation, the genetic tests may not be allowed into evidence at a later date.
11. Each party has a continuing duty to inform the Court of any proceeding in this or any other state that could affect the current proceeding.
12. I/We understand that the Court may review any case involving the children, Petitioner, Co-Petitioner/ Respondent and other parties named in this Petition that have been filed in any Court.
13. I/We have participated in the following proceeding(s) regarding the child(ren) as a party or a witness, or in any other capacity concerning the allocation of parental responsibilities including decision-making, child support and parenting time with the child(ren). Identify name of court, case number, state, date, and type of proceeding if any.

Name of Court	Case Number	State	Date of Proceeding	Type of Proceeding

14. I/We know of the following proceeding(s) that could affect the current proceeding including, but not limited to proceedings relating to domestic violence or domestic abuse, enforcement of Court orders, protection/restraining orders, termination of parental rights, and adoptions. Identify name of court, case number, state, date, and type of proceeding if any.

Name of Court	Case Number	State	Date of Proceeding	Type of Proceeding

15. The following people are not parties in this matter, but have physical custody of the child(ren) or claim rights of parental responsibilities, legal custody or physical custody, or visitation/parenting time with the child(ren). Identify name and address of those persons, if any.

Full Name of Person	Address (Street, City/State, Zip Code)

16. Required Notice of Human Services Involvement.

The parents or dependent child(ren) listed on this Petition has/have received within the last five years, or is/are currently receiving benefits or public assistance from the state Department of Human Services or the County Department of Social Services. No Yes If your answer was **Yes**, complete the following:

Name of Person Receiving Benefit	Name of County and State	Case Number	Month/Year

17. Required Notice of Prior Protection/Restraining Orders.

Have any Temporary or Permanent Protection/Restraining Orders to prevent domestic abuse or any Criminal Mandatory Protection/Restraining Orders (MRO) or Emergency Protection Orders been issued against either party within two years prior to the filing of this Petition?

No Yes If your answer was **Yes**, complete the following:

The Protection/Restraining Order was Temporary Permanent MRO and issued against _____ in a Municipal Court County Court District Court in the County of _____, State of _____, in case number _____ on _____ (date).

What was the subject matter of the Protection/Restraining Order or Emergency Protection Order?

18. Notice of Existing Case with Child Support Enforcement (CSE)

The parents have filed a case with CSE? No Yes If **Yes**, identify the case number: _____

19. I/We ask that the Court enter orders regarding the status of the marriage, best interests of the child(ren), maintenance (spousal support) child support, division of property and debts, attorney fees and costs, if appropriate, restoration of the previous name of a party, and any other necessary orders.

20. The Petitioner Co-Petitioner requests that the Court restore his/her **prior full name** to _____.

Notice: Colorado Revised Statutes §14-10-107, provides that upon the filing of a Petition for Dissolution of Marriage or Legal Separation by the Petitioner and Co-Petitioner, or upon personal service of the Petition and Summons on the Respondent, or upon waiver and acceptance of service by the Respondent, an automatic temporary injunction shall be in effect against **both parties** until the Final Decree is entered, or the Petition is dismissed, or until further Order of the Court. Either party may apply to the Court for further temporary orders, an expanded automatic temporary injunction, or modification or revocation under §14-10-108, C.R.S. or any other appropriate statute.

1. Both parties are restrained from transferring, encumbering, concealing, or in any way disposing of, without the consent of the other party, or an Order of the Court, any marital property, except in the usual course of business or for the necessities of life. Each party is required to notify the other party

of any proposed extraordinary expenditures and to account for all extraordinary expenditures made after the injunction is in effect; and

2. Both parties are enjoined from molesting or disturbing the peace of the other party or the minor child(ren); and
3. Both parties are restrained from removing the minor child(ren) of the parties, if any, from the state without the consent of the other party or an Order of the Court; and
4. Both parties are restrained, without at least 14 days advance notification and the written consent of the other party or an Order of the Court, from canceling, modifying, terminating, or allowing to lapse for nonpayment of premiums, any policy of health insurance, homeowner's or renter's insurance, or automobile insurance that provides coverage to either of the parties or the minor child(ren) or any policy of life insurance that names either of the parties or the minor child(ren) as a beneficiary.

Nothing in this automatic injunction shall prohibit either party from applying to the Court for further orders, an expanded automatic temporary injunction, or orders modifying or revoking this injunction.

Petitioner and Co-Petitioner, if any, acknowledge that he or she has received a copy of, has read, and understands the terms of the automatic temporary injunction set forth in this Petition and the Summons.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

VERIFICATION

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the _____ day of _____, _____, at _____
(date) (month) (year) (city or other location, and state OR country)

(Printed name of Petitioner)

Signature of Petitioner

Attorney Signature (if any)

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the _____ day of _____, _____, at _____
(date) (month) (year) (city or other location, and state OR country)

(Printed name of Co-Petitioner)

Signature of Co-Petitioner

Attorney Signature (if any)

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

Full name of Petitioner: _____

Date of birth: _____ Social Security Number: _____

Residential address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Mailing address (if different from residential address): _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home _____ Work _____ Cell _____

Full name of Co-Petitioner/Respondent: _____

Date of birth: _____ Social Security Number: _____

Residential address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Mailing address (if different from residential address): _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home _____ Work _____ Cell _____

The following child(ren) was/were born or adopted of this marriage. (attach a second sheet, if necessary):

Full Name of Child	Present Address	Sex	Date of Birth	Soc. Sec. No.

The Petitioner is planning to be self-represented.

The Co-Petitioner/Respondent is planning to be self-represented.

Both you and the other party have retained an attorney.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

SIGNATURE

Printed name of Petitioner or Co-Petitioner/Respondent

Signature of Petitioner or Co-Petitioner/Respondent

Date

District Court _____ County, Colorado Court Address:	
In re the Marriage of: Petitioner: and Respondent:	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address):	Case Number:
Phone Number: E-mail:	Division Courtroom
FAX Number: Atty. Reg. #:	
SUMMONS FOR: <input type="checkbox"/> DISSOLUTION OF MARRIAGE OR <input type="checkbox"/> LEGAL SEPARATION	

To the Respondent named above, this Summons serves as a notice to appear in this case.

If you were served in the State of Colorado, you must file your Response with the clerk of this Court within 21 days after this Summons is served on you to participate in this action.

If you were served outside of the State of Colorado or you were served by publication, you must file your Response with the clerk of this Court within 35 days after this Summons is served on you to participate in this action.

You may be required to pay a filing fee with your Response. The Response form (JDF 1103) can be found at www.courts.state.co.us by clicking on the "Self Help/Forms" tab.

After 91 days from the date of service or publication, the Court may enter a Decree affecting your marital status, distribution of property and debts, issues involving children such as child support, allocation of parental responsibilities (decision-making and parenting time), maintenance (spousal support), attorney fees, and costs to the extent the Court has jurisdiction.

If you fail to file a Response in this case, any or all of the matters above, or any related matters which come before this Court, may be decided without further notice to you.

This is an action to obtain a Decree of: Dissolution of Marriage or Legal Separation as more fully described in the attached Petition, and if you have children, for orders regarding the children of the marriage.

Notice: §14-10-107, C.R.S. provides that upon the filing of a Petition for Dissolution of Marriage or Legal Separation by the Petitioner and Co-Petitioner, or upon personal service of the Petition and Summons on the Respondent, or upon waiver and acceptance of service by the Respondent, an automatic temporary injunction shall be in effect against **both parties** until the Final Decree is entered, or the Petition is dismissed, or until further Order of the Court. Either party may apply to the Court for further temporary orders, an expanded temporary injunction, or modification or revocation under §14-10-108, C.R.S.

A request for genetic tests shall not prejudice the requesting party in matters concerning allocation of parental responsibilities pursuant to §14-10-124(1.5), C.R.S. If genetic tests are not obtained prior to a legal establishment of paternity and submitted into evidence prior to the entry of the final decree of dissolution or legal separation, the genetic tests may not be allowed into evidence at a later date.

Automatic Temporary Injunction – By Order of Colorado Law, You and Your Spouse are:

1. Restrained from transferring, encumbering, concealing or in any way disposing of, without the consent of the other party or an Order of the Court, any marital property, except in the usual course of business or for the necessities of life. Each party is required to notify the other party of any proposed extraordinary expenditures and to account to the Court for all extraordinary expenditures made after the injunction is in effect;
2. Enjoined from molesting or disturbing the peace of the other party;
3. Restrained from removing the minor children of the parties, if any, from the State without the consent of the other party or an Order of the Court; and
4. Restrained without at least 14 days advance notification and the written consent of the other party or an Order of the Court, from canceling, modifying, terminating, or allowing to lapse for nonpayment of premiums, any policy of health insurance, homeowner’s or renter’s insurance, or automobile insurance that provides coverage to either of the parties or the minor children or any policy of life insurance that names either of the parties or the minor children as a beneficiary.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

Date: _____

 Signature of the Clerk of Court/Deputy

 Signature of the Attorney for the Petitioner (if any)

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

Full name of Petitioner: _____

Date of birth: _____ Social Security Number: _____

Residential address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Mailing address (if different from residential address): _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home _____ Work _____ Cell _____

Full name of Co-Petitioner/Respondent: _____

Date of birth: _____ Social Security Number: _____

Residential address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Mailing address (if different from residential address): _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home _____ Work _____ Cell _____

The following child(ren) was/were born or adopted of this marriage. (attach a second sheet, if necessary):

Full Name of Child	Present Address	Sex	Date of Birth	Soc. Sec. No.

The Petitioner is planning to be self-represented.

The Co-Petitioner/Respondent is planning to be self-represented.

Both you and the other party have retained an attorney.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

SIGNATURE

Printed name of Petitioner or Co-Petitioner/Respondent

Signature of Petitioner or Co-Petitioner/Respondent

Date

District Court _____ County, Colorado Court Address: _____	
In re the Marriage of: Petitioner: _____ and Respondent: _____	▲ Court Use Only ▲
	Case Number: _____ Division: _____ Courtroom: _____
Return of Service	

I am 18 years or older and not a party to the action. I served this Summons, a copy of the Petition, and if applicable, the
 Case Management Order, Notice of Initial Status Conference, and Other (please identify): _____
 _____ in this case on the Respondent in
 (county) _____ (state) _____ on (date) _____ at (time) _____ at
 the following location: _____.

I delivered the documents by (check one):

- By handing it to a person identified to me as the Respondent (print name): _____.
- By leaving it with (print name) _____, who is designated to receive service for the Respondent because of the following relationship with the Respondent: _____ as provided for in C.R.C.P. 4(e).
- I attempted to serve the Respondent on _____ occasions but have not been able to locate the Respondent. Return to the Petitioner is made on (date) _____.
- I attempted to leave it with Respondent who refused service.

I charged the following fees in this matter:

- Private process server.
- Sheriff, for _____ County.

Fee \$ _____ Mileage \$ _____

- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.
- By checking this box, I am acknowledging that I have made a change to the original content of this form.

VERIFICATION

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the _____ day of _____, _____ in _____
 (date) (month) (year) (city/other location, and state/country)

 (printed name of process server) (signature of process server) (date)

<input type="checkbox"/> Supreme Court <input type="checkbox"/> Court of Appeals <input type="checkbox"/> Denver Juvenile Court <input type="checkbox"/> Denver Probate Court <input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> Plaintiff/Petitioner: _____ v. Defendant/Respondent: _____ Attorney or Party Without Attorney: (Name & Address) _____ Phone Number: _____ Atty. Reg. #: _____	▲ COURT USE ONLY ▲ <hr/> Case Number: _____ Courtroom: _____
MOTION TO: <input type="checkbox"/> FILE WITHOUT PAYMENT OF FILING FEE <input type="checkbox"/> WAIVE OTHER COSTS OWED TO THE STATE AND SUPPORTING FINANCIAL AFFIDAVIT	

I, _____ respectfully move the Court for an order to waive the following filing fee(s):
 complaint petition answer response motion to modify other: _____ and as grounds state that I am without funds, have no adequate funds available, and have a meritorious claim.

All items must be fully completed. Print or type neatly. If an item does not apply, please write "N/A"

Name of Applicant		
Last Name	First Name	MI
Street Address (Include Apt. # if applicable) _____		
City	State	Zip Code
<input type="checkbox"/> Own <input type="checkbox"/> Rent Home Phone #: _____		
Social Security #	Driver's Lic. # & State	Date of Birth
Most Recent Employer: _____		
Work Address: _____		
Work Phone #: () _____		
Dates Employed: _____		
Hours/Week: _____ Pay Rate: \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____		
Name of Other Responsible Party(Spouse, Partner, Parent, Other Persons in Household)		
Last Name	First Name	MI
Street Address (Include Apt. # if applicable) _____		
City	State	Zip Code
<input type="checkbox"/> Own <input type="checkbox"/> Rent Home Phone #: _____		
Social Security #	Driver's Lic. # & State	Date of Birth
Most Recent Employer: _____		
Work Address: _____		
Work Phone #: () _____		
Dates Employed: _____		

Hours/Week: _____ Pay Rate: \$ _____ Weekly Bi-weekly Monthly Annual Other: _____

Marital Status: Single Married Partner in a Civil Union Divorced/Civil Union Dissolved Separated
 Widowed

Number in Household: (including yourself) _____

Identify Members:

_____	_____	_____
Name	Age	Relationship
_____	_____	_____
Name	Age	Relationship

Gross Monthly Income (See Information on page 3)		Monthly Expenses (See Information on Page 3)	
Self (wages, salary, commission)	\$ _____	Rent or Mortgage	\$ _____
Spouse/Partner, Other Household Members	\$ _____	Groceries	\$ _____
Parents (if same household)	\$ _____	Utilities	\$ _____
Unemployment Benefits	\$ _____	Clothing	\$ _____
Social Security/Retirement Funds	\$ _____	Maintenance/Alimony and/or Child Support	\$ _____
Maintenance/Alimony	\$ _____	Medical/Dental	\$ _____
Other Income (identify)	\$ _____	Other Expenses (identify)	\$ _____
Other Income (identify)	\$ _____	Other Expenses (identify)	\$ _____
Total Income	\$ _____	Total Expenses	\$ _____
Cash on Hand (Cash you are carrying or which is stored at home, etc.)	\$ _____	Credit Cards: (Show type and balance owed)	
		Type: _____	Balance \$ _____
		Type: _____	Balance \$ _____
Checking Account Balance	\$ _____	Name/Address of Bank: _____	
Savings Account Balance	\$ _____	Name/Address of Bank: _____	
Stocks, Bonds, or other Investments Held Balance	\$ _____	Type of Investment _____ Name/Location of Company/Corporation _____	
Vehicles Owned (Autos, boats, recreational vehicles, etc.) - Estimate Value	\$ _____	Year _____ Model _____ License Plate _____	
		Year _____ Model _____ License Plate _____	
House(s) or other Property Estimate Value	\$ _____	Amount owed \$ _____ Year Purchased _____	

IF ADDITIONAL SPACE IS NEEDED TO PROVIDE COMPLETE INFORMATION, ATTACH A SEPARATE PAGE.

I swear under penalty of perjury that all information provided is true and complete. In addition, if requested I will provide three (3) months of bank statements and pay stubs or other comparable proof of income status. I authorize the Court to make any necessary contacts to verify the information.

Signature: _____

Date: _____

MOTION TO FILE WITHOUT PAYMENT SUPPORTING FINANCIAL AFFIDAVIT, AND SUPPORTING DOCUMENTATION REQUESTED

General Information

It is important that you accurately complete all sections of this form as appropriate based on your personal circumstances. If a section does not apply, please write N/A.

A. Gross Monthly Income. Includes income from all members of the household who contribute monetarily to the common support of the household.

♦ **Income categories to include:**

Wages, including tips, salaries, commissions, payments received as an independent contractor for labor or services, bonuses, dividends, severance pay, pensions, retirement benefits, royalties, interest/investment earnings, trust income, annuities, capital gains, unemployment benefits, Social Security Disability (SSD), Social Security Supplemental Income (SSI), Workman's Compensation Benefits, and alimony.

Note: Income from roommates should not be considered if such income is not commingled in accounts or otherwise combined with the applicant's income in a fashion which would allow the applicant proprietary rights to the roommate's income.

♦ **Income categories do not include:**

TANF payments, food stamps, subsidized housing assistance, veteran's benefits earned from a disability, child support payments, or other public assistance programs.

B. Liquid Assets. Includes cash on hand or in accounts, stocks bonds, certificates of deposit, equity, and personal property or investments which could readily be converted into cash without jeopardizing the applicant's ability to maintain home and employment.

Expenses. Nonessential items such as cable television, club memberships, entertainment, dining out, alcohol, cigarettes, etc., **shall not** be included. Allowable expense categories are listed on JDF 205.

If you are applying to have your filing fee waived you may be asked to supply:

- Copies of the previous three months bank statements, including checking and savings. **DO NOT provide originals.**
- Copies of the previous three months pay stubs and/or proof of income must be included. **DO NOT provide originals.**

County Court <input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court <input type="checkbox"/> Denver Probate Court <input type="checkbox"/> _____ County, Colorado Court Address: _____ _____ Plaintiff/Petitioner: _____ v. Defendant/Respondent/Co-Petitioner: _____	▲ COURT USE ONLY ▲ Case Number: _____ Division Courtroom
FINDING AND ORDER CONCERNING PAYMENT OF FILING FEES	

Name of Party filing Motion: _____ on _____ (Date).

Upon review of the attached Motion, the above party is:

- Eligible to proceed without payment of the following filing fee(s):
 - complaint petition answer
 - response motion to modify other: _____
- Eligible to have the filing fee of \$_____ paid in two three payments, with the first payment due by _____ (date) and the final payment due by _____ (date).
- Not Eligible to proceed. Party is responsible for payment of the filing fees.

Date: _____

 Signature of Eligibility Investigator, Clerk of Court, Judge/Magistrate

ORDER

The Court has reviewed the Motion (JDF 205) and so orders:

- As indicated above.
- The specified party is ordered to pay \$_____ by _____ (Date) to cover filing fees.
- Other _____

The Court finds that by allowing a party to proceed with a payment plan, the party has agreed to pay the fee as listed above. Failure to pay will result in collection against the party. Costs associated with collection will be assessed.

A subsequent motion to proceed without payment of filing fees must be filed upon order of the court or anytime the case is re-opened. Pursuant to §13-16-103, C.R.S., in the event the party who receives a waiver of costs prosecutes or defends an action or proceeding successfully, there shall be a judgment entered in his/her favor in the amount of the court costs and the party shall, upon collecting such court costs, remit them to the Court.

Date: _____

 Judge Magistrate