County District/Combined	Court
Street Address:	
City: State: Zip:	
In the Case of:	
Plaintiff:	
v.	,
Defendant: Colorado Department of Revenue, N	Motor FOR COURT USE A
Vehicles Division.	
	Case Number:
Filing Party Name:	Courtroom:
Street Address:	
City: State: Zip: _	Division:
Phone:	
Certificate of Service	
I certify that I sent a copy of the Complaint for Judicial Review and Civil Case	
Cover sheet via first class certified mail on (date)	to the
following:	
Colorado Department of Revenue	Colorado Attorney General
Hearings Division	Human Resources Division
1881 Pierce Street, STE 106	1300 Broadway, 6 th Floor
Lakewood, CO 80214	Denver, CO 80203
Signature:	
Print Name:	