| | | Count | y, Colorado | | | |
|--|---|---------------------------|----------------|---------------------|--|--|
| | ounty Court District Co address: | | | | | |
| Phone | e Number : | | | | | |
| | tiff(s)/Petitioner(s): | | | | | |
| | | | | | | |
| Defer | ndant(s)/Respondent(s): | | | | | |
| | | | | | URT USE ONLY | |
| Attorney or Party Without Attorney (Name and Address | | |): | Case Numbe | | |
| - | e Number: Number: | E-mail: Atty. Reg #.: | | Division | Courtroom | |
| | C | ONSENT TO ASSIGN | MENT TO MAGI | STRATE | | |
| My nam | ne is | | | · | , | |
| (After re | eading carefully, check one of | the boxes below.) | | | | |
| 🔲 I am | n a plaintiff in this case. | | I am counsel f | or a plaintiff in t | his case. | |
| 🛛 I am | n a defendant in this case. | | I am counsel f | or a defendant | in this case. | |
| □ (Atto | orneys only) I represent the fo | llowing party or parties: | | | | |
| | | IMPORTAI | | | | |
| CONSE | | | | | ENT FORM. YOU CANNOT OUSES CANNOT CONSENT | |
| con | I <u>do</u> consent to a magistrate presiding at all hearings and ruling on all motions in this case. I understand that if I do not consent, the case will be handled by the county court judge or such other judge as may be assigned. I also understand that if I do consent, I cannot withdraw my consent at a later time. | | | | | |
| □ I <u>do</u> | I do not consent to a magistrate presiding at all hearings and ruling on all motions in this case. I understand that if I do consent, the case will be handled by the county court judge or such other judge as may be assigned. | | | | | |
| | | | | | | |

| DATE: | |
|-------|--|
| | |
| | |
| | |

Signature (If <u>not</u> attorney, type or print name, address & telephone number below)

JDF 405 R2/00 CONSENT TO ASSIGNMENT TO MAGISTRATE