County, Colorado District Cource Court address: Phone Number: In the Interest of: Petitioner: Respondent/Co-Petitioner: Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: AX Number: Atty.Reg.#: NOTICE TO S D:	▲ COURT USE ONLY ▲ Case Number: ▲ Division Courtroom SET ▲ OPetitioner OR □ Respondent sion
n the Interest of: Petitioner: Respondent/Co-Petitioner: Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: FAX Number: Atty.Reg.#: NOTICE TO S	Case Number: Division Courtroom SET Petitioner OR Respondent sion on(date)
n the Interest of: Petitioner: Respondent/Co-Petitioner: Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: FAX Number: Atty.Reg.#: NOTICE TO S	Case Number: Division Courtroom SET Petitioner OR Respondent sion on (date)
Respondent/Co-Petitioner: Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: AX Number: Atty.Reg.#: NOTICE TO S	Case Number: Division Courtroom SET Petitioner OR Respondent sion on(date)
Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: FAX Number: Atty.Reg.#: NOTICE TO S	Case Number: Division Courtroom SET Petitioner OR Respondent sion on(date)
Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: FAX Number: Atty.Reg.#: NOTICE TO S	Case Number: Division Courtroom SET Petitioner OR Respondent sion on(date)
Phone Number: E-mail: FAX Number: Atty.Reg.#: NOTICE TO S	Case Number: Division Courtroom SET Petitioner OR Respondent sion on(date)
AX Number: Atty.Reg.#: NOTICE TO S	SET Petitioner OR Respondent(date)
AX Number: Atty.Reg.#: NOTICE TO S	SET Petitioner OR Respondent(date)
NOTICE TO S	SET Petitioner OR Respondent(date)
	Petitioner OR Respondent
):	sion (date)
	sion (date)
Please Take Notice that I will contact the Clerk in Divis	the District Court, Division, to
(time) and set a time and date for a hearing in t solve the issues of:	
solve the issues of:	
PATERNITY, ALLOCATION OF PARENTAL RESPO	ONSIBILITIES and CHILD SUPPORT.
The Division Clerk's phone number is:	
Date:	
Petitioner	OR 🖵 Respondent
Address	
City, State, Zip	n Code
(Area Code) Te	elephone Number (home and work)
<u>CERTIFICATE OF S</u>	SERVICE
I certify that on (date) the orig th the court; and, a true and accurate copy of the <i>NOTICE</i> and Delivery OR	TO SET was served on the other party by \Box
D:	