

Certificate of Service

I certify that on (date) \_\_\_\_\_,

I {  mailed }, or {  hand delivered }

(title of document served) \_\_\_\_\_

to the Court of Appeals and mailed copies to the people listed below:

(You must send a copy to each party. If a party has a lawyer, send the copy to the lawyer)

Industrial Claim Appeals Office

633 17<sup>th</sup> St., Suite 200

Denver, CO 80202-3660

Colorado Attorney General

1300 Broadway, 6<sup>th</sup> Floor

Denver, Colorado 80203

Other Parties (For example, the employer if you are the claimant, or claimant if you are the employer):

Name of Person Served: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Space for other parties served:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_