Colorado Court of Appeals 2 East 14th Avenue Denver, CO 80203 ——————————————— Appeal from: Industrial Claim Appeals Office (ICAO) Docket/Case Number: _____ ——————————————— Petitioner: _____, v. Respondent(s): Industrial Claim Appeals Office, and _____ _____ ——————————————— Filing Party Name: _____ Street Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ E-Mail: _____	△ FOR COURT USE △ ——————————————— Court of Appeals Case Number: _____
Opening Brief	

Certificate of Compliance

I certify that this brief complies with the requirements of Colorado Appellate Rules (C.A.R.) 28 and 32. Including:

Word Limits: My brief has _____ **words**, which is not more than the 9,500 word limit.

Included Sections: This brief has the following subsections for each Issue on Appeal:

The Standard of Review: I discuss which Standard of Review should be used to evaluate that issue.

Preservation: I discuss if that issue was preserved for appeal. I cite to the page in the Record on Appeal where I raised this issue before the agency, and I cite to where the agency decided that issue.

I understand that my brief may be rejected if I fail to comply with these rules.

_____

Signature of the Petitioner

Issue 1: _____

A. Standard of Review:

B. Preservation on Appeal:

C. Law:

D. Facts:

E. Discussion:

F. Conclusion:

Issue 2: _____

A. Standard of Review:

B. Preservation on Appeal:

C. Law:

D. Facts:

E. Discussion:

F. Conclusion:

{Repeat sections A-F for each additional issue}

<u>Conclusion</u>

Dated: _____

Respectfully submitted,

Signature: _____
                    Petitioner

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I certify that on (date) _____,

I {☐ mailed}, or {☐ hand delivered}

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

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

<u>Industrial Claim Appeals Office</u>

633 17th St., Suite 200

Denver, CO 80202-3660

<u>Colorado Attorney General</u>

1300 Broadway, 6th Floor

Denver, Colorado 80203

<u>Respondent</u> (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: _____

Petitioner