

Colorado Court of Appeals 2 East 14 <sup>th</sup> Avenue Denver, CO 80203	
<hr/> Appeal from: Industrial Claim Appeals Office (ICAO)	
Docket/Case Number: _____	
<hr/> Petitioner: _____,	
v.	
Respondent(s): Industrial Claim Appeals Office, and	
_____	
_____	
<hr/> Filing Party Name: _____	▲ FOR COURT USE ▲
Street Address: _____	
City: _____ State: _____ Zip: _____	Court of Appeals Case
Phone: _____	Number: _____
E-Mail: _____	
<p style="text-align: center;"><b>Motion to/for</b> _____</p>	

I respectfully request the Court of Appeals to grant this Motion to/for:

Explain what you want the Court of Appeals to do and the reasons why the court should grant your request below:

Dated: \_\_\_\_\_

Respectfully submitted,

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

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

Certificate of Service

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

I {  mailed }, or {  hand delivered }

this Motion 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: \_\_\_\_\_