

This Supplemental User Agreement is the mutual understanding of the Colorado Judicial Department ("Judicial Department") and _______ ("Filing Agency") and the undersigned attorney(s) ("Subscribers") regarding the authorization of the Filing Agency and its personnel to file documents through Colorado Courts E-Filing as a Third Party Filer.

- 1) The Subscriber hereby authorizes the Filing Agency to file court documents on its behalf through the Colorado Courts E-Filing system.
- The Filing Agency shall pay all applicable Colorado Courts E-Filing Service Fees and Court Fees associated with the filing of documents on behalf of the Subscriber through the Colorado Courts E-Filing system.
- 3) If the Filing Agency fails to pay the fees specified in Section 2 of this Agreement, the undersigned attorney Subscriber agrees to be responsible for payment. Failure to pay may result in but not be limited to the following penalties: account deactivation, interest and late fees, report to Attorney Regulation and/or legal action.
- 4) The Filing Agency understands that this Supplemental Agreement only authorizes it to institute actions through the Colorado Courts E-Filing system in its own name and in accordance with Rules 17 and 317 of the Colorado Rules of Civil Procedure.
- The Subscriber and Filing Agency will continue to be bound by the Colorado Courts E-Filing User Agreement located <u>here</u>.
- 6) The Agreement may be terminated by either party with notice to the Judicial Department at least five (5) days prior to termination. All fees must be paid to Colorado Courts E-Filing for the termination to be accepted.

If you agree with the terms of this Supplemental User Agreement, sign below, e-mail a scanned version of the signed original to <u>efilingsupport@judicial.state.co.us</u>, and retain the signed original on file at the Filing Agency's address.

[Third-Party Filing Agency]

Title: _____

[Colorado Subscriber]

Attorney Name Printed: _____

Colorado Registration Number: _____

Law Firm Name: ______

Law Firm :

[Street Address]

[City, State and Zip]

Attorney Signature: _____

Date of Signature: