

<input type="checkbox"/> County Court _____ County, Colorado Court Address: _____ <b>Plaintiff(s):</b>  <b>Defendant(s):</b>		<b>▲ COURT USE ONLY ▲</b>
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg.#: _____		
<b>ANSWER UNDER SIMPLIFIED CIVIL PROCEDURE (including counterclaim(s) and/or cross claim(s))</b>		

The Defendant(s) \_\_\_\_\_, answer(s) the complaint as follows:

1. The amount of damages claimed to be due to the Plaintiff(s) by the complaint in this action is not due and owing for the following reasons:

OR the Plaintiff(s) is/are not entitled to possession of the property and Defendant(s) is/are entitled to retain possession for the following reasons:

OR the injunctive relief requested by the Plaintiff(s) should not be allowed for the following reasons:

2. (If applicable) the Defendant(s), \_\_\_\_\_, assert(s) the following counterclaim(s) or setoff(s) against the Plaintiff(s):

3. (If applicable) the Defendant(s) \_\_\_\_\_, assert(s) the following cross claim(s) against \_\_\_\_\_, named Defendant(s) (you are limited to the jurisdiction of the court):

4. If a counterclaim is asserted above, you must check one of the following statements:
- The amount of the counterclaim does not exceed the jurisdiction of the court (County Court filing fee required).
  - The amount of the counterclaim does exceed the jurisdiction of the court, but I wish to limit my recovery to the jurisdiction of the court (County Court filing fee required).
  - The amount of the counterclaim does exceed the jurisdiction of the court, and I wish the case transferred to the District Court (District Court filing fee required).

1. The Defendant(s)  does (do)  does (do) not demand trial by jury (if demand is made a jury fee must be paid).

**WARNING: ALL FEES ARE NON-REFUNDABLE. IN SOME CASES, A REQUEST FOR A JURY TRIAL MAY BE DENIED PURSUANT TO LAW EVEN THOUGH A JURY FEE HAS BEEN PAID.**

Note: All Defendants filing this answer must sign unless the answer is signed by an attorney.

\_\_\_\_\_  
Signature of Defendant(s)

\_\_\_\_\_  
Signature of Attorney for Defendant(s) (if applicable)

Address(es) of Defendant(s): \_\_\_\_\_

Phone Number(s) of Defendant(s): \_\_\_\_\_

**CERTIFICATE OF MAILING**

I certify that a true copy of the answer was mailed, postage prepaid, to \_\_\_\_\_  
(Plaintiff(s) or attorney), at \_\_\_\_\_ (address(es)),  
on \_\_\_\_\_ (date).

\_\_\_\_\_  
Defendant(s) or Attorney for Defendant(s) Signature