

_____ County, Colorado <input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ Municipal Court, Colorado Court address: _____ Phone Number : _____ VS.	
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg #: _____	▲ COURT USE ONLY ▲ Case Number: _____ Arrest Number: _____ Warrant Number: _____ Bond Number: _____ Division _____ Courtroom _____
CERTIFICATE OF DISCHARGE	

BOND POSTED FOR: Defendant Respondent Plaintiff Petitioner Child

NAME OF PARTY (print or type): _____
First Middle Last DOB

DATE BOND POSTED: _____

AMOUNT OF BOND: _____

POWER OF ATTORNEY NUMBER: _____

BAIL BONDING AGENT: _____

SURETY COMPANY: _____
 (Optional. Insert if information is available)

THIS CERTIFIES that the liability of the sureties upon the referenced appearance bond was discharged by this Court
 on (date) _____.

DATE: _____

CLERK OF THE COURT

(COURT SEAL)

BY: _____
 Deputy Clerk