

_____ 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 _____
NOTICE OF SHOW CAUSE HEARING	

BOND POSTED FOR: Defendant Respondent Plaintiff Petitioner Child

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

RE: POWER OF ATTORNEY # _____

YOU ARE NOTIFIED THAT a show cause hearing has been scheduled, per your request, pursuant to C.R.S. 16-4-112(5)(b)(III).

YOU ARE CITED to appear for a hearing in division _____ of _____ Court
 at (address) _____,
 on (date) _____ at _____ A.M./P.M., to show cause why judgment should not be
 entered against you in the amount of the bond. If you fail to appear, judgment will be entered pursuant to
 C.R.S. 16-4-112(5)(C).

CLERK OF COURT

 Deputy Clerk

CERTIFICATE OF SERVICE

I certify that on (date) _____, I served a copy of the Notice of Show Cause Hearing, by personal service or postage prepaid, to the following:

Bail Bonding Agent:

Prosecuting Attorney:

Address: _____

Address: _____

City, State & Zip: _____

City, State & Zip: _____

Clerk of Court

 Deputy Clerk