

STATE OF COLORADO OFFICE OF ADMINISTRATIVE COURTS 633 17 th Street, Suite 1300, Denver, CO 80202 Fax: (303) 866-5909 1259 Lake Plaza Drive, Suite 210, Colo. Springs, CO 80906 Fax: (719) 576-5978 222 S. 6 th Street, Suite 414, Grand Jct., CO 81501 Fax: (970) 248-7341	▲ COURT USE ONLY ▲
_____ Claimant, vs. _____ Employer, and _____ Respondent.	
PETITION TO REVIEW (RULE 26 OACRP)	

TO THE OFFICE OF ADMINISTRATIVE COURTS AND JUDGE _____ :

The (claimant/ employer/ insurance carrier) petitions for review of the order of Judge _____ issued on _____ (mo/day/yr). No transcript is requested.

Petitioner objects to the Findings of Fact, Conclusions of Law, and Order of the Judge on the following ground(s):

(Set forth in detail the particular alleged errors and your objections to the order. You may attach additional pages):

CERTIFICATE OF SERVICE

I hereby certify that a copy of this document has been mailed to the ALJ and to the following parties, at the addresses shown and on the date below:

ALJ: _____
Office of Administrative Courts

Opposing Party or Attorney:

Mailed on the _____ day of _____, 20____.

Signature of Petitioner or Attorney

Petitioner's Name and Address (Printed)

