

Court of Appeals, State of Colorado 2 East 14th Avenue, Denver, CO 80203 Name of Lower Court(s): _____ Trial Court Judges(s): _____ Case Number(s): _____	▲ COURT USE ONLY ▲
THE PEOPLE OF THE STATE OF COLORADO In the Interest of : _____ [initials pursuant to § 19-1-109(1)] Minor Child(ren), And Concerning: _____ [initials pursuant to § 19-1-109(1)] Appellant/Respondent: _____	
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
SUPPLEMENTAL DESIGNATION OF RECORD	

In addition to the transcripts designated by appellant, the clerk of the trial court shall include in the record on appeal:

1. The original transcripts of the following proceedings:
 - a. _____ (List the name and the date of the proceeding.)
 - b. _____ ([List the name and the date of the proceeding.]

2. The name and address of the court reporter(s) is:

 Name

 Address

 City State Zip Code

 Name

 Address

 City State Zip Code

 Signature Date

CERTIFICATE OF MAILING

I certify that on _____ (date) the original of this *SUPPLEMENTAL DESIGNATION OF RECORD* was filed with the trial court and the Court of Appeals; and a true and accurate copy of this *SUPPLEMENTAL DESIGNATION OF RECORD* was served on the other party (ies) and the court reporter(s) by placing it in the United States mail, postage pre-paid and addressed to the following:

 Signature