

**UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLORADO  
UNREPRESENTED PARTY CM/ECF REGISTRATION FORM**

To register for an account on this court's Electronic Case Filing System (CM/ECF), please complete the following information. (\* indicates a required field)

Complete this box ONLY if this is a reactivation of an existing unrepresented party CM/ECF account.

\* Pending case number: \_\_\_\_\_

\* First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

\* Last name: \_\_\_\_\_

\* Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

\* City: \_\_\_\_\_

\* State: \_\_\_\_\_ \* Zip code: \_\_\_\_\_

\* Email 1: \_\_\_\_\_

(Where to receive filing confirmations and CM/ECF login credentials)

\* Phone number: \_\_\_\_\_

Email 2 (optional): \_\_\_\_\_

Current CM/ECF login: _____
Reason for reactivation (check one):
New case
New case # _____
Withdrawal of Attorney

The information contained in this box will be maintained by the clerk's office in confidence, and is necessary for confirmation purposes if you lose or forget your password.	
* Last 4 digits of SSN: _____	* Driver's license # or Govt. ID #: _____
* Mother's maiden name: _____	<b>Your password must be a minimum of 8 characters and include:</b> <b>1. At least 1 uppercase letter,</b> <b>2. At least 1 lowercase letter, and</b> <b>3. At least 1 number or special character.</b>
CM/ECF password requested: _____	

Check to certify that:

The undersigned has completed online CM/ECF training and that he/she has a PACER account.

The undersigned agrees to abide by all court rules, orders, and policies and procedures governing the use of the electronic case filing system.

The undersigned consents to receiving notice of filings pursuant to Fed. R. Civ. P. 5 and 77 via the court's electronic case filing system.

The undersigned has read and is familiar with the filing requirements of the District of Colorado's Local Rules of Practice and the Electronic Case Filing Procedures governing electronic filing, which may be found on the court's website.

The undersigned consents that use of the undersigned's login and password when filing papers and pleadings will serve as his/her signature pursuant to and for the purposes of Fed. R. Civ. P. 11.

The undersigned agrees that all transmissions for electronic case filings of pleadings and documents to the CM/ECF system shall be titled and filed using the approved directory of civil events of the CM/ECF system.

I have read the **Terms of Use and Instructions** on the first page of this form and will abide by all rules and guidelines.

\* Signature: s/ \_\_\_\_\_

\* Date: \_\_\_\_\_

After completion, you must email this completed form to [cod\\_cmecf@cod.uscourts.gov](mailto:cod_cmecf@cod.uscourts.gov). You should also print or cc yourself on the email to keep a copy.

\*\*\*\*\* **FOR COURT USE ONLY** \*\*\*\*\*

APPROVED:	DISAPPROVED:	_____	_____
		Signature	Date