

County Court <u>Jefferson</u> County, Colorado		19 APR 11 PM 2:16
Court Address: 100 Jefferson County Parkway, Golden, CO 80401		
Plaintiff(s): <u>STEVE QUEST</u>		▲ COURT USE ONLY ▲
v.		
Defendant(s): <u>JAKE MORPHONIOS</u>		Case Number: 19C670
Attorney or Party Without Attorney (Name and Address): <u>98 WADSWORTH BLVD #127-245</u> <u>LAKEWOOD, COLORADO 80226</u>		
Phone Number:	E-mail: <u>Steve Quest</u>	Division <u>H</u> Courtroom <u>2G</u>
FAX Number: <u>720319 1007</u>	Atty. Reg. #:	
SUMMONS		

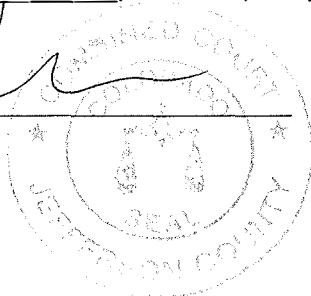
To the above named Defendant(s): Take notice that

- On May 29, 2019 (date) at 1:00 PM (time) in the Jefferson County Court, Golden, Colorado, if an answer is not filed, the Court may be asked to enter judgment against you as set forth in the Complaint.
- A copy of the Complaint against you and an answer form which you must use if you file an answer are attached.
- If you do not agree with the complaint, then you must either:
 - Go to the Court, located at Jefferson County Parkway, Golden, CO 80401, Colorado, at the above date and time and file the answer stating any legal reason you have why judgment should not be entered against you,
OR
 - File the answer with the Court before that date and time.
- When you file your answer, you must pay a filing fee to the Clerk of the Court.
- If you file an answer, you must give or mail a copy to the Plaintiff(s) or the attorney who signed the complaint.
- If you do not file an answer, then the Court may enter a default judgment against you for the relief requested in the complaint.
- If you want a jury trial, you must ask for one in the answer and pay a jury fee in addition to the filing fee.
- If you want to file an answer or request for a jury trial and you are indigent, you must appear at the above date and time, fill out a financial affidavit, and ask the Court to waive the fee.

Dated at Golden, Colorado, this 11th day of April, 20 19.

CLERK OF COURT

by [Signature]
Deputy Clerk of Court



Signature of Attorney for Plaintiff(s) (if applicable)
98 WADSWORTH BLVD #127-245
LAKEWOOD, CO 80226
Address(es) of Plaintiff(s)
720xxx xxxx
Telephone Number(s) of Plaintiff(s):

This Summons is issued pursuant to Rule 303, Rules of County Court Civil Procedure, as amended. A copy of the Complaint together with a blank answer form must be served with this Summons. This form should not be used where service by publication is desired.

To the clerk: If this Summons is issued by the Clerk of the Court, the signature block for the clerk, deputy and the seal of the Court should be provided by stamp, or typewriter, in the space to the left of the attorney's name.

WARNING: ALL FEES ARE NON-REFUNDABLE. IN SOME CASES, A REQUEST FOR A JURY TRIAL MAY BE DENIED PURSUANT TO LAW EVEN THOUGH A JURY FEE HAS BEEN PAID.

<input checked="" type="checkbox"/> County Court <input type="checkbox"/> District Court <u>Jefferson</u> County, Colorado Court Address: <u>100 Jefferson County Parkway, Golden, CO 80401</u>	
Plaintiff/Petitioner(s): <u>STEVE QUEST</u> v. Defendant/Respondent(s): <u>JOAKE RONDE MORPHONIOS</u>	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): <u>STEVE QUEST 98 WADSWORTH BLVD</u> Phone Number: _____ E-mail: <u>#127-245 LAKEWOOD, CO</u> FAX Number: _____ Atty. Reg. #: <u>80226</u>	Case Number: <u>19C670</u> Division <u>H</u> Courtroom <u>2G</u>

AFFIDAVIT OF SERVICE

I declare under oath that I am 18 years or older and not a party to the action and that I served THE FOLLOWING DOCUMENTS _____ on the Defendant/Respondent in _____ (name of County/State) on _____ (date) at _____ (time) at the following location: _____.

☐ By handing the documents to a person identified to me as the Defendant/Respondent: _____ (print name of person served).

☐ By identifying the documents, offering to deliver them to a person identified to me as the Defendant/Respondent who refused service, and then leaving the documents in a conspicuous place.

☐ By leaving the documents at the Defendant/Respondent's usual place of abode with _____ (Name of Person) who is a member of the Defendant/Respondent's family and whose age is 18 years or older. (Identify family relationship) _____.

☐ By leaving the documents at the Defendant/Respondent's usual workplace with _____ (Name of Person) who is the Defendant/Respondent's secretary, administrative assistant, bookkeeper, or managing agent. (Circle title of person served.)

☐ By leaving the documents with _____ (Name of Person), who as _____ (title) is authorized by appointment or by law to receive service of process for the Defendant/Respondent.

☐ By serving the documents as follows (other service permitted by C.R.C.P. 4(g) or C.R.C.P. 304(c)(d) and (e): _____.

☐ **For Eviction Cases Only.**

I have made diligent efforts such as _____ (list personal service attempts) but have been unable to make personal service on the Defendant/Respondent(s) and I have made service of the within summons and complaint by posting a copy of them in a conspicuous place upon the premises described therein.

I have charged the following fees for my services in this matter:

☐ Private process server

☐ Sheriff, _____ County
 Fee \$ _____ Mileage \$ _____

County Court <u>JEFFERSON</u> County, Colorado		19 APR 11 PM 2:16
Court Address: <u>100 Jefferson County Parkway, Golden, CO 80401</u>		
Plaintiff(s): <u>STEVE QUEST</u>		▲ COURT USE ONLY ▲
v. Defendant(s): <u>JAKE R MORPHONIOS</u>		
Attorney or Party Without Attorney (Name and Address): <u>98 WADSWORTH BLVD LAKEWOOD, CO 80226 (#245)</u>		Case Number: <u>19C670</u>
Phone Number:	E-mail: <u>STEVE@STEVEQUEST.COM</u>	Division <u>H</u> Courtroom <u>2G</u>
FAX Number: <u>720-xxxxxxx</u>	Fax #: <u>g</u>	
COMPLAINT UNDER SIMPLIFIED CIVIL PROCEDURE		

- JAKE MORPHONIOS defendant(s), is (are) resident(s) of KERNERSVILLE County, with a post office address of XXXX Street, City xxxxxxx of NORTH CAROLINA.
- The amount claimed herein does not exceed the jurisdiction of the court. 27284
OR
- The amount claimed from JAKE MORPHONIOS, defendant(s), is/are TWENTY FIVE THOUSAND dollars and ZERO cents (\$25,000), together with proper interest, costs and any other items allocable by statute or specific agreement.

- Such claim arises from the following event(s) or transaction(s):
JAKE MORPHONIOS ACCUSED ME OF VILE & DISGUSTING ACTS DURING A LIVE BROADCAST ON HIS BLACKSTONE INTELLIGENCE CHANNEL. DEFAMING MY CHARACTER IN WHICH THOUSANDS OF PEOPLE HEARD THIS PUBLICLY
- The Defendant(s) ☐ is (are) ☒ is not (are not) in the military service of the United States. In support of this statement, the Plaintiff(s) set(s) forth the following facts: (State facts concerning military status of the Defendant(s), if the military status of the Defendant(s) is (are) not known, so state here.)
- The Plaintiff(s) ☐ does (do) ☒ does (do) not demand trial by jury (if demand is made, a jury fee must be paid).

WARNING: ALL FEES ARE NON-REFUNDABLE. IN SOME CASES, A REQUEST FOR A JURY TRIAL MAY BE DENIED PURSUANT TO LAW EVEN THOUGH A JURY FEE HAS BEEN PAID.

Note: All Plaintiffs filing this complaint must sign, unless the complaint is signed by an attorney.

Signature of Plaintiff(s)

Signature of Attorney for Plaintiff(s) (if applicable)

Address(es) of Plaintiff(s)

Telephone Number(s) of Plaintiff(s)

County Court <u>Jefferson</u> County, Colorado Court Address: <u>100 Jefferson County Parkway, Golden, CO 80401</u>		▲ COURT USE ONLY ▲
Plaintiff(s): <u>STEVE QUEST</u> v. Defendant(s): <u>JAKE MORPHONIOS</u>		
Attorney or Party Without Attorney (Name and Address): <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Phone Number: FAX Number: </div> <div style="width: 45%;"> E-mail: Atty. Reg. #: </div> </div>		
Case Number: <div style="font-size: 1.5em; margin-top: 10px;">19C670</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Division <u>H</u></div> <div>Courtroom <u>2G</u></div> </div>		
ANSWER UNDER SIMPLIFIED CIVIL PROCEDURE (including counterclaim(s) and/or cross claim(s))		

The Defendant(s) _____ (name), answer(s) the complaint as follows:

1. The amount of damages claimed to be due to the Plaintiff(s) by the complaint in this action is not due and owing for the following reasons:

OR

the Plaintiff(s) is/are not entitled to possession of the property and Defendant(s) is/are entitled to retain possession for the following reasons:

OR

the injunctive relief requested by the Plaintiff(s) should not be allowed for the following reasons:

2. ☐ (If applicable) the Defendant(s), _____, assert(s) the following counterclaim(s) or setoff(s) against the Plaintiff(s)

3. ☐ (If applicable) the Defendant(s) _____, assert(s) the following cross claim(s) against _____, named Defendant(s) (you are limited to the jurisdiction of the court):

4. If a counterclaim is asserted above, you must check one of the following statements:

- ☐ The amount of the counterclaim **does not** exceed the jurisdiction of the court (County Court filing fee required).
☐ The amount of the counterclaim **does** exceed the jurisdiction of the court, but I wish to limit my recovery to the jurisdiction of the court (County Court filing fee required).
☐ The amount of the counterclaim **does** exceed the jurisdiction of the court, and I wish the case transferred to the District Court (District Court filing fee required)

5. The Defendant(s):

- ☐ Request(s) a trial to the court.
☐ Request(s) a jury trial. By requesting a jury trial, the Defendant(s) understand(s) that a jury fee must be paid unless the fee is waived by the Court.

WARNING: ALL FEES ARE NON-REFUNDABLE. IN SOME CASES, A REQUEST FOR A JURY TRIAL MAY BE DENIED PURSUANT TO LAW EVEN THOUGH A JURY FEE HAS BEEN PAID.

Note: All Defendants filing this answer must sign unless the answer is signed by an attorney.

VERIFICATION

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the _____ day of _____, _____, at _____
(date) (month) (year) (city or other location, and state OR country)

(Printed name of Defendant(s))

Signature of Defendant(s)

Signature of Attorney for Defendant(s) (if applicable)

Address(es) of Defendant(s): _____

Phone Number(s) of Defendant(s): _____

CERTIFICATE OF SERVICE

I certify that on _____ (date) a true and accurate copy of this *ANSWER UNDER SIMPLIFIED CIVIL PROCEDURE* was served on _____ the other party(s) or attorney(s) by:

☐ Hand Delivery ☐ E-filed ☐ Faxed to this number _____ or ☐ by placing it in the United States mail, postage pre-paid, and addressed to the following:

Defendant(s) or Attorney for Defendant(s) Signature