

Court of Appeals, Division One

State of Arizona

<p>Filer Information</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State, Zip Code: _____</p> <p>Telephone: _____</p> <p>Email: _____</p> <p><input type="checkbox"/> I am self-represented <i>(if checked, skip attorney info below)</i></p> <p>Attorney for: _____</p> <p>Law firm name: _____</p> <p>State Bar number: _____</p>	<p><i>For Court Use Only</i></p>
<p>Petitioner <i>(worker name)</i>:</p>	<p>Court of Appeals case number:</p> <p>1 CA-IC</p>
<p>Respondent:</p> <p><i>Industrial Commission of Arizona</i></p> <p>Respondent Employer <i>(company name)</i>:</p> <p>Insurance company <i>(if applicable)</i>:</p>	<p>ICA Claim number:</p> <p>Carrier Claim number <i>(if applicable)</i>:</p>
<p>MOTION FOR EXTENSION OF TIME TO FILE BRIEF</p>	

Motion for Extension of Time to File Brief

1. Name of the party asking for the extension: _____
2. Which brief is the extension for? _____
3. What is the current brief due date? _____
4. What is the requested brief due date? _____
5. Why do you want the court to give you more time? (*Attach additional pages if necessary, up to a total of 5 pages*).

6. You must ask the other party (or their attorney) if they agree with your request. What did the other party say?

- Agrees to the extension.
- Does not agree to the extension.
- I do not know. Explain:

Signature

Printed Name

Date

REMEMBER:

File this form and a separate [Certificate of Service](#) in the Arizona Court of Appeals, Division One through TurboCourt.com or by mailing/delivering to 1501 W. Washington, Suite 203, Phoenix, AZ 85007.

Give a copy of your completed form to every other party in this appeal.