

10. The below named person understands that accurate records and proof of payment shall be required to settle payment disputes. The Notice of Direct Payments of Restitution (JDF 242), along with proof of payments, may be filed with the court (by the below named person or by the defendant) for any official adjustments to the court's record of amounts due.
11. The below named person understands that, upon filing of a Victim's Notice of Withdrawal of Intent to Pursue Collection by Victim (JDF 230), a completed Notice of Direct Payments of Restitution (JDF 242), including dates, amounts, and forms of payment, along with proof of payments, must also be filed in order to enable the court to assess interest for the duration of time between the filing of this notice and of their withdrawal.
12. The below named person shall notify the collections investigator of this court of any notice that the Defendant has filed for bankruptcy within ten days of receipt of such notice.
13. This Notice of Intent to Pursue Collection by Victim was delivered to the Clerk of the Court and, if the Defendant was sentenced to the Department of Corrections, to the Executive Director of the Department of Corrections on _____ (date delivered).
14. The below named person shall, within twenty-one days after the payment in full of all restitution owed, file the Notice of Direct Payments of Restitution (JDF 242). In addition, in the event that a transcript of the order for restitution has been recorded in the real estate records of any county in Colorado, the below named person shall obtain a Satisfaction of Judgment, issued by the Clerk of Court, and file it with each clerk and recorder where a transcript was recorded within the same twenty-one day period. The Satisfaction of Judgment shall be conclusive evidence that any lien was extinguished.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

SIGNATURE

(Printed name of Victim)

Signature of Victim

Date

Address

City

State

Zip Code

(Area Code) Home Telephone Number

(Area Code) Work Telephone Number