

9. The below named person understands that, in order to enable the court to assess interest for the duration of time between the filing of their Notice of Intent to Pursue Collections by Victim (JDF 229) and of this withdrawal, 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.
10. 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.
11. Upon receipt of this Notice of Withdrawal the Collections Investigator and the Department of Corrections shall pursue collection of restitution pursuant to Article 18.5 of Title 16, C.R.S., as amended.
12. 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.
13. The below named person elects the following:

Any restitution or interest payments applied on their behalf shall be sent to the address listed at the end of this document (a valid mailing address must be included in this instance).

Any restitution or interest payments applied on their behalf shall be held and paid to the local VALE Board as unclaimed restitution. They understand that the Defendant is still obligated to pay the court ordered restitution, but no longer wish to receive any payments.

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
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Petitioner's Address	City	State	Zip Code
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(Area Code) Home Telephone Number	(Area Code) Work Telephone Number
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