❑District Court ❑Denver Probate Court _____ County, Colorado Court Address: **In the Matter of the Estate of:** **Deceased**	▲ **COURT USE ONLY** ▲
Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: FAX Number: Atty. Reg. #:	Case Number: Division Courtroom

ACCEPTANCE OF APPOINTMENT

I accept appointment to, and agree to perform the duties and discharge the trust of, the office of:

❑Personal Representative;

❑Successor Personal Representative;

❑Special Administrator; or

❑Other: _____ .

I submit personally to the jurisdiction of this court in any proceeding relating to this matter.

VERIFICATION

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

Executed on the _____ day of _____, _____,
(date) (month) (year)

at _____
(city or other location, and state OR country)

_____
(printed name)

_____
(signature)

Note:

- This form is for decedent estate matters only.
- For guardianships and conservatorships matters use the Acceptance of Office (JDF 805).