□ District Court □ Denver Probate Court	
Court Address:	
In the Matter of the Estate of:	
Deceased	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Addre	ss): Case Number:
Phone Number: E-mail:	
FAX Number: Atty. Reg. #:	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.	
VEDI	FICATION
VERI	FICATION
I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.	
Executed on the day of,,(year	<u>,</u>
(date) (month) (year)
at (city or other location, and state OR country)	
(city of other location, and state of 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).