

**NOTICE OF MEETING**  
COMMITTEE ON RULES AND FORMS  
TRUST AND ESTATE SECTION OF THE COLORADO BAR ASSOCIATION  
To: Members of the Rules and Forms Committee

***In addition to paper copies of materials that will be made available at the meeting, such materials will be made available through the CBA link and/or website in advance of the meeting. In addition, Committee members will have the option of interacting with meeting materials using Google Docs during the meeting while they are discussed and edited in "real-time", if they bring their own computer, tablet, or other device.***

**THE NEXT MEETING WILL BE SEPTEMBER 20, 2018  
11:15 A.M. TO 12:15 P.M.**

LUNCH WILL BE PROVIDED TO THOSE WHO ATTEND

Location:  
COLORADO BAR ASSOCIATION  
9th Floor, Executive Conference Room (please check schedule board on arrival)  
1900 Grant Street, Suite 900  
Denver, CO 80203-4309  
(303) 860-1112

If you are unable to attend the meeting in person but would like to participate by phone, please dial (855) 392-2520; ACCESS CODE: 2627690#

**AGENDA FOR SEPTEMBER 20, 2018 MEETING**

**1) Chair Report (Jarod Balson)**

- a. Update on changes to JDFs from Supreme Court
- b. Review Colorado Probate Code Forms
  - 1. See Drive for Forms
- c. Updates from Casey Williams

**2) Review of August 16, 2018, Meeting Minutes**

**3) Subcommittee and Liaison Reports**

- a. Probate Advisory Workgroup (Casey Williams)
- b. Supreme Court Probate Rules and Forms Committee (Casey Williams)
- c. Trial and Procedure Committee (Aaron Evans)
- d. Real Estate Sub Committee (Peggy Gardner)

**4) Current Issues**

- a. Notice of Time Limit to Contest Validity of Trust (Kevin Millard)
- b. Trust Challenge Notice Pursuant to § 15-16-704(1)(a) (Kevin Millard/Barbara VanVliet)
- c. Changes to the determination of heirship statutes—JDF updates (Leia Ursery)
- d. Waiver—JDF 889 (Casey Williams)
- e. Petition to Terminate Conservatorship—JDF 888 (Gordon Williams)
- f. Provisional Letters for Transfer (Gordon Williams)
- g. Application for Informal Appointment of Personal Representative JDF 916 (Gene Zuspahn)
- h. Petition for Transfer of Lodged Will Pursuant to CRS 15-11-516(2)
- i. Petition and Order to Approve Settlement of Claims (Aaron Evans)
- j. Petition to Approve Personal Injury Settlement (Aaron Evans)
- k. Petition for Transfer of Lodged Will

**5) New Forms to Review/Address**

- a. Declaration of Disposition of Last Remains (Orange Book)
- b. Affidavit of Grantee Acting in Representative Capacity
- c. Bill of Sale
- d. Colorado Living Will
- e. Shares and Allowances
  - 1. Request for Family Allowance and Exempt Property Allowance
  - 2. Petition for Elective Share
  - 3. Order Determining Elective Share
- f. Designated Beneficiary Agreements
  - 1. Transfer of Title Upon Death of Designated Beneficiary Auto
  - 2. Designated Beneficiary Agreements (Orange Book)
- g. Powers of Attorney
  - 1. Limited Guardianship
  - 2. Limited Purpose
  - 3. Medical Durable
  - 4. Revocation of Designated Beneficiary Agreement
  - 5. Revocation
  - 6. Statutory

**MINUTES OF AUGUST 16, 2018 MEETING**  
RULES AND FORMS COMMITTEE  
TRUST AND ESTATE SECTION  
THE COLORADO BAR ASSOCIATION

Mike Holder	Frank Hill	Kate Noble
Laurence Gendelman	Myka Landry	Sara Bucar
Jarod Balson	Gordon Williams	

**1) Chair Report (Jarod Balson)**

a. Review of Changes to Rules of Probate Procedure

1. Rules appear to have been approved according to Judge Terry. The rules have been adopted. Significant changes were made to these Rules. C.R.C.P. Rule 16 is now C.R.C.P. Rule 62, C.R.P.P. Rule 8.8 with respect to non-appearance hearings has been revised, see C.R.P.P. Rule 24. Discussion regarding the previous rule. We are still waiting to see the changes to the JDF forms from the Supreme Court.
2. Approach for changing forms. The Committee will not be updating Bradforms to the extent that there is an Orange Book or Practitioner Form that already exists. However, we will look at the deeds from the subcommittee to provide feedback.
3. Discussion regarding duty to confer. The duty to confer was amended to apply to *pro se* parties. Recently, an El Paso County Court found that all interested persons must be involved in conferral. The Committee believes that there is a substantial difference between a party and an interested person. Mr. Hill believes that this should be an issue to address with the litigation committee as well.

b. Bradforms to Review/Update

1. Beneficiary Deed
2. Trustee's Deed
3. Personal Representative Deed (Sale)
4. Personal Representative Deed (Distribution)
5. Revocation of Beneficiary Deed
6. Conservator's Deed
7. Conservator's Deed (Joint Tenancy)
8. Supplementary Affidavit

**2) Review of May 17, 2018, Meeting Minutes**

No objections to minutes- approved without amendments.

### **3) Subcommittee and Liaison Reports**

- a. Probate Advisory Workgroup (Casey Williams)
  - i. 1. Ms. Williams was not present.
- b. Supreme Court Probate Rules and Forms Committee (Casey Williams)
  - i. 1. Ms. Williams was not present. Mr. Holder provided updates as already discussed.
- c. Trial and Procedure Committee (Aaron Evans)
  - i. 1. Mr. Balson was in the committee's meeting and discussed directed trusts as they relate to the issue of surcharge, fault, damages, and taking into account the different fiduciary conduct standards. Discussion about applying higher standards to protect trustee.
- d. Real Estate Sub Committee (Peggy Gardner)
  - i. 1. The sub- committee was meeting at the time of this Committee's meeting.
- e. Discussion regarding abandoned estate planning documents
  - i. 1. SRC is voting on issues concerning the new secretary of state rules concerning abandoned estate planning documents. Forms will require electronic certifications. If approved by SRC, there will be further discussion and the issues will be brought to Elder Law.

### **4) Current Issues**

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### **5) New Forms to Review/Address**

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- d. Colorado Living Will
- e. Shares and Allowances
  - i. Request for Family Allowance and Exempt Property Allowance
  - ii. Petition for Elective Share
  - iii. Order Determining Elective Share
- f. Designated Beneficiary Agreements
  - i. Transfer of Title Upon Death of Designated Beneficiary Auto

- ii. Designated Beneficiary Agreements (Orange Book)
- g. Powers of Attorney
  - i. Limited Guardianship
  - ii. Limited Purpose
  - iii. Medical Durable
  - iv. Revocation of Designated Beneficiary Agreement
  - v. Revocation
  - vi. Statutory

Meeting Adjourned at 12:12pm.

## COLORADO PROBATE CODE FORMS

- Form 703. Petition for Transfer of Lodged Will Pursuant to § 15-11-516(2), C.R.S.
- Form 704. Order for Transfer of Lodged Will
- Form 705. Probate Case Information Sheet
- Form 711. Notice of Hearing
- Form 712. Notice of Hearing Without Appearance Pursuant to C.R.P.P. 24
- Form 714. Affidavit Regarding Due Diligence and Proof of Publication Pursuant to  
§§ 15-10-402(1)(c) AND 15-10-401(3), C.R.S.
- Form 716. Notice of Hearing by Publication Pursuant to § 15-10-401, C.R.S
- Form 718. Personal Service Affidavit
- Form 719. Waiver of Notice
- Form 721. Irrevocable Power of Attorney Designating Clerk of Court as Agent for Service of  
Process
- Form 722. Objection to a Hearing Without Appearance
- Form 726. Claim
- Form 727. Withdrawal or Satisfaction of Claim and Release
- Form 730. Decree of Final Discharge Pursuant to  
§§ 15-12-1001, 15-12-1002, or 15-14-431, C.R.S.
- Form 731. Receipt and Release
- Form 732. Trust Registration Statement
- Form 735. Amended Trust Registration Statement
- Form 740. Request for Minor Correction Pursuant to C.R.P.P Rule 11
- Form 742. Order Appointing Guardian Ad Litem
- Form 781. Provisional Letters Pursuant To § 15-14.5-302, C.R.S.
- Form 783. Petition Requesting Colorado To Accept Guardianship/Conservatorship
- Form 784. Provisional Order to Accept Guardianship/Conservatorship in Colorado From  
Sending State Pursuant to § 15-14.5-302, C.R.S. The Uniform Adult Guardianship and  
Protective Proceedings Jurisdiction Act
- Form 785. Final Order Accepting Guardianship/Conservatorship in Colorado from Sending State  
Pursuant to § 15-14.5-302, C.R.S. Uniform Adult Guardianship and Protective  
Proceedings Jurisdiction Act
- Form 787. Petition to Transfer Guardianship/Conservatorship from Colorado to Receiving State
- Form 788. Provisional Order Re: Petition to Transfer from Colorado To Receiving State  
Guardianship/Conservatorship Pursuant to § 15-14.5-301, C.R.S. Uniform Adult  
Guardianship and Protective Proceedings Jurisdiction Act
- Form 789. Final Order Confirming Transfer to Receiving State and Terminating  
Guardianship/Conservatorship in Colorado Pursuant to § 15-14.5-301, C.R.S. Uniform  
Adult Guardianship and Protective Proceedings Jurisdiction Act
- Form 800. Acknowledgment of Responsibilities
- Form 805. Acceptance of Office
- Form 806. Notice of Hearing to Interested Persons
- Form 807. Notice of Hearing to Respondent
- Form 809. Order Appointing Court Visitor
- Form 810. Court Visitor's Report
- Form 812. Notice of Appointment of Guardian And/or Conservator

Form 821. Affidavit of Acceptance of Appointment by Written Instrument as Guardian for Minor Pursuant to § 15-14-202, C.R.S.

Form 822. Petition for Confirmation of Appointment of Guardian Pursuant to § 15-14-202(6), C.R.S.

Form 824. Petition for Appointment of Guardian for Minor

Form 825. Consent of Parent

Form 826. Consent or Nomination of Minor

Form 827. Order Appointing Guardian for Minor

Form 828. Order Appointing Temporary Guardian for Minor Pursuant to § 15-14-204(4), C.R.S.

Form 829. Order Appointing Emergency Guardian for Minor Pursuant to § 15-14-204(5), C.R.S.

Form 830. Letters of Guardianship - Minor

Form 834. Guardian's Report - Minor

Form 835. Petition for Termination of Guardianship - Minor

Form 836. Order for Termination of Guardianship - Minor Pursuant to § 15-14-210, C.R.S.

Form 841. Petition for Appointment of Guardian for Adult

Form 843. Order Appointing Emergency Guardian for Adult Pursuant to § 15-14-312, C.R.S.

Form 844. Notice of Appointment of Emergency Guardian and Notice of Right to Hearing Pursuant to § 15-14-312, C.R.S.

Form 846. Order Appointing Temporary Substitute Guardian for Adult Pursuant to § 15-14-312, C.R.S.

Form 848. Order Appointing Guardian for Adult

Form 849. Letters of Guardianship - Adult

Form 850. Guardian's Report - Adult

Form 852. Petition for Termination of Guardianship – Adult Pursuant to § 15-14-318, C.R.S.

Form 853. Notice of Death

Form 854. Order for Termination of Guardianship – Adult Pursuant to § 15-14-318, C.R.S.

Form 855. Petition for Modification of Guardianship - Adult or Minor Pursuant to §§15-14-318, C.R.S. or 15-14-210, C.R.S.

Form 856. Order for Modification of Guardianship - Adult or Minor Pursuant to §§15-14-318, C.R.S. or 15-14-210, C.R.S.

Form 857. Petition for Appointment of Co-Guardian or Successor Guardian

Form 858. Order Appointing Co-Guardian or Successor Guardian

Form 861. Petition for Appointment of Conservator for Minor

Form 862. Order Appointing Conservator for Minor

Form 863. Letters of Conservatorship – Minor

Form 865. Order for Deposit of Funds to Restricted Account-Conservatorship

Form 866. Order for Deposit of Funds to Restricted Account and Annual Filing of Restricted Account Report

Form 867. Acknowledgment of Deposit of Funds to Restricted Account

Form 868. Motion to Withdraw Funds from Restricted Account

Form 869. Order RE: Allowing Motion to Withdraw Funds from Restricted Account

Form 876. Petition for Appointment of Conservator for Adult

Form 877. Order Appointing Special Conservator - Adult or Minor

Form 878. Order Appointing Conservator for Adult

Form 879. Petitioner for Appointment of Co-Conservator or Successor Conservator

Form 880. Letters of Conservatorship - Adult

Form 882. Conservator's Financial Plan with Inventory and Motion for Approval  
Form 883. Order Regarding Conservator's Financial Plan  
Form 884. Order Appointing Co-Conservator or Successor Conservator  
Form 885. Conservator's Report Adult or Minor  
Form 888. Petition for Termination of Conservatorship Adult or Minor  
Form 889. Waiver of Hearing, Waiver of Final Conservator's Report, Waiver of Audit, And  
Approval of Schedule of Distribution  
Form 890. Order Terminating Conservatorship  
Form 891. Registration and Recognition of Protective Orders from other States and Sworn  
Statements – Conservator for Adult Pursuant to § 15-14.5-402, C.R.S. Uniform Adult  
Guardianship and Protective Proceedings Jurisdiction Act  
Form 892. Certificate of Registration and Recognition of Protective Orders from Other States –  
Conservatorship for Adult  
Form 897. Online Conservator's Report Attachment Sheet (OCRA)  
Form 898. Public Administrator's Statement of Accounts Pursuant to Small Estates Procedure  
Form 902. Demand for Notice of Filings or Orders Pursuant to §15-12-204, C.R.S. and  
C.R.P.P.21  
Form 903. Withdrawal of Demand for Notice of Filings or Orders Pursuant to  
§ 15-12-204, C.R.S.  
Form 910. Application for Informal Probate of Will and Informal Appointment of Personal  
Representative  
Form 911. Acceptance of Appointment  
Form 912. Renunciation And/or Nomination of Personal Representative  
Form 913. Order for Informal Probate of Will and Informal Appointment of Personal  
Representative  
Form 915. Letters Testamentary/Of Administration  
Form 916. Application for Informal Appointment of Personal Representative  
Form 917. Order for Informal Appointment of Personal Representative  
Form 920. Petition for Formal Probate of Will and Formal Appointment of Personal  
Representative  
Form 921. Order Admitting Will to Formal Probate and Formal Appointment of Personal  
Representative  
Form 922. Petition for Adjudication of Intestacy and Formal Appointment of Personal  
Representative  
Form 923. Order of Intestacy, Determination of Heirs and Formal Appointment of Personal  
Representative  
Form 924. Application for Informal Appointment of Special Administrator Pursuant to  
§ 15-12-614, C.R.S.  
Form 925. Order for Informal Appointment of Special Administrator  
Form 926. Petition for Formal Appointment of Special Administrator Pursuant to  
§ 15-12-614, C.R.S.  
Form 927. Order for Formal Appointment of Special Administrator  
Form 928. Letters of Special Administration  
Form 929. Domiciliary Foreign Personal Representative's Sworn Statement  
Form 930. Certificate of Ancillary Filing - Decedent's Estate  
Form 940. Information of Appointment



Form 941. Decedent's Estate Inventory  
Form 942. Interim/Final Accounting  
Form 943. Notice to Creditors by Publication Pursuant to § 15-12-614, C.R.S.  
Form 944. Notice to Creditors by Mail or Delivery Pursuant to § 15-12-801, C.R.S.  
Form 945. Notice of Disallowance of Claims Pursuant to § 15-12-806, C.R.S.  
Form 946. Petition for Allowance of Claim(s) Pursuant to § 15-12-806, C.R.S.  
Form 948. Petition for The Determination of Heirs or Devisees or Both, and of Interests in Property  
Form 949. Notice of Hearing to Interested Persons and Owners by Inheritance Pursuant to § 15-12-1303, C.R.S.  
Form 950. Notice of Hearing by Publication Interested Persons and Owners by Inheritance Pursuant to § 15-12-1303, C.R.S.  
Form 951. Application for Informal Appointment of Successor Personal Representative  
Form 960. Petition for Final Settlement  
Form 963. Notice of Hearing Without Appearance on Petition for Final Settlement  
Form 964. Order for Final Settlement  
Form 965. Statement of Personal Representative Closing Administration Pursuant to § 15-12-1003, C.R.S.  
Form 966. Statement of Personal Representative Closing Small Estate Pursuant to § 15-12-1204, C.R.S.  
Form 967. Verified Application for Certificate from Registrar Pursuant to § 15-12-1007, C.R.S.  
Form 968. Certificate of Registrar  
Form 970. Response to Notice and Order Closing Estate After Three Years  
Form 971. Notice and Order Closing Estate After Three Years or More  
Form 990. Petition to Re-Open Estate Pursuant To § 15-12-1008, C.R.S.  
Form 991. Order Re-Opening Estate Pursuant To § 15-12-1008, C.R.S.  
Form 999. Collection of Personal Property by Affidavit Pursuant To § 15-12-1201, C.R.S.

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address:	
IN THE MATTER OF THE TRUST CREATED BY: _____ Settlor.	
Attorney or Party Without Attorney (Name and Address):   Phone Number: _____ E-mail: _____ Fax Number: _____ Atty. Reg. #: _____	▲ Court Use Only ▲  Case Number:
<b>NOTICE OF TIME LIMIT TO CONTEST VALIDITY OF TRUST</b>	

\_\_\_\_\_, trustee of the [name of trust], dated \_\_\_\_\_  
\_\_\_\_\_ (the "Trust"), gives this notice, in accordance with Colorado Revised Statutes §  
15-16-704(1)(a), of the time limit to contest the validity of the Trust.

1. \_\_\_\_\_ (the "Settlor") created the Trust during [his/her] lifetime.
2. The Settlor died on \_\_\_\_\_.
3. The Trust was revocable at the time of the Settlor's death.
4. The trustee's name and address are:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. A copy of the trust instrument of the Trust is enclosed with this Notice.
6. If you wish to contest the validity of the Trust, you must do so within the earlier of three years after the Settlor's death or 120 days after this Notice is sent to you. If you fail to do so, any right you may have to contest the Trust will be barred.

Date: \_\_\_\_\_, \_\_\_\_\_, Trustee

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) a copy of this Notice was served on each of the following:

Name of Person to Whom You Are Sending this Document	Relationship	Address	Manner of Service*

\* Insert one of the following: Hand Delivery, First-Class Mail, Certified Mail, E-Served or Faxed.

\_\_\_\_\_  
Signature

**AFFIDAVIT FOR GRANTEE ACTING IN A  
REPRESENTATIVE CAPACITY  
PURSUANT TO C.R.S. § 38-30-108**

STATE OF COLORADO

\_\_\_\_\_ County of \_\_\_\_\_

The undersigned, being of lawful age and being first duly sworn, is the grantee in a representative capacity named in an instrument conveying an interest in real estate, and for the purpose of complying with Section 38-30-108, C.R.S., does hereby affirm as follows:

1. The instrument conveying the interest in real estate in such representative capacity was recorded at Book/Page No. \_\_\_\_\_ Reception/Film No. \_\_\_\_\_ Document/File No. \_\_\_\_\_ on \_\_\_\_\_ (date) in the records of the Clerk and Recorder of the \_\_\_\_\_ County of \_\_\_\_\_, Colorado.

2. In such instrument of conveyance, the interest was transferred to the undersigned as:

- |  |  |
|--|--|
| <input type="checkbox"/> Trustee       | <input type="checkbox"/> Attorney-in-Fact        |
| <input type="checkbox"/> Agent         | <input type="checkbox"/> Personal Representative |
| <input type="checkbox"/> Conservator   | <input type="checkbox"/> Nominee                 |
| <input type="checkbox"/> Executor      | <input type="checkbox"/> Custodian               |
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Other _____             |

3. For the purpose of complying with § 38-30-108, C.R.S., the undersigned also states (complete one or more of the following):

- (a) The name of the person represented is \_\_\_\_\_.
- (b) The statute, trust or other agreement, or the court appointment under which the grantee is acting is: \_\_\_\_\_.
- (c) The description of the representative capacity of the undersigned was recorded with the County Clerk and Recorder of the \_\_\_\_\_ County of \_\_\_\_\_ at Book/Page No. \_\_\_\_\_ Reception/Film No. \_\_\_\_\_ Document/File No. \_\_\_\_\_.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Witness my hand and seal.

\_\_\_\_\_  
Notary Public  
My commission expires: \_\_\_\_\_

**BENEFICIARY DEED**

**(§1515401, et seq., Colorado Revised Statutes)**  
**CAUTION: THIS DEED MUST BE RECORDED PRIOR TO THE DEATH OF THE GRANTOR IN ORDER TO BE EFFECTIVE.**

\_\_\_\_\_, as grantor, designates \_\_\_\_\_ as grantee-beneficiary whose address is\* \_\_\_\_\_.

If grantee-beneficiary fails to survive grantor, grantor designates \_\_\_\_\_, as successor grantee-beneficiary, whose address is \_\_\_\_\_.

Grantor transfers, sells, and conveys on grantor's death to the grantee-beneficiary, the following described real property located in the County of \_\_\_\_\_, State of Colorado:

also known and numbered as \_\_\_\_\_.

THIS BENEFICIARY DEED IS REVOCABLE. IT DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR. IT REVOKES ALL PRIOR BENEFICIARY DEEDS BY THIS GRANTOR FOR THIS REAL PROPERTY EVEN IF THIS BENEFICIARY DEED FAILS TO CONVEY ALL OF THE GRANTOR'S INTEREST IN THIS REAL PROPERTY.

WARNING: EXECUTION OF THIS BENEFICIARY DEED MAY DISQUALIFY THE GRANTOR FROM BEING DETERMINED ELIGIBLE FOR, OR FROM RECEIVING MEDICAID UNDER TITLE 26, COLORADO REVISED STATUTES.

WARNING: EXECUTION OF THIS BENEFICIARY DEED MAY NOT AVOID PROBATE.

Executed on \_\_\_\_\_ (date).

\_\_\_\_\_  
Grantor

STATE OF COLORADO  
\_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
\_\_\_\_\_, by \_\_\_\_\_.

Witness my hand and official seal.  
My commission expires:

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Name and Address of Person Creating Newly Created Legal Description (§ 38-35-106.5, C.R.S.)

*\*(Note to Assessor and Treasurer: This address is for identification purposes only, all notices and tax statements should continue to be sent to grantor.)*

**BILL OF SALE**

**KNOW ALL BY THESE PRESENTS**, That \_\_\_\_\_  
of the \_\_\_\_\_ County of \_\_\_\_\_, State of Colorado, (Seller), for and in consideration  
of \_\_\_\_\_ Dollars,  
to him in hand paid, at or before the ensembling or delivery of these presents by \_\_\_\_\_  
of the \_\_\_\_\_ County of \_\_\_\_\_, in the State of Colorado, (Buyer), the receipt of  
which is hereby acknowledged, has bargained and sold, and by these presents does grant and convey unto  
the said Buyer, his personal representatives, successors and assigns, the following property, goods and  
chattels, to wit:

located at \_\_\_\_\_

TO HAVE AND TO HOLD the same unto the said Buyer, his personal representatives, successors  
and assigns, forever. The said Seller covenants and agrees to and with the Buyer, his personal  
representatives, successors and assigns, to WARRANT AND DEFEND the sale of said property, goods  
and chattels, against all and every person or persons whomever. When used herein, the singular shall  
include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

IN WITNESS WHEREOF, the Seller has executed this Bill of Sale on (date) \_\_\_\_\_.

\_\_\_\_\_  
\_\_\_\_\_

STATE OF COLORADO,  
\_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
by \_\_\_\_\_.

Witness my hand and official seal.

My Commission expires \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

## **Bradforms to Update Rules & Forms Committee**

Form 1112 PF 003	Statement of Authority Statement of Authority
Form 1215	Trustee's Deed
Form 1216	Affidavit for Grantee Acting in a Representative Capacity
Form 1217	Declaration of Disposition of Last Remains
Form 35A	Bill of Sale
Form 39A	Last Will and Testament (Without Children)
Form 39B	Colorado Living Will (Advance Health Care Directive)
Form 39C	Last Will and Testament (Minor Children)
Form 450	Designated Beneficiary Agreement
Form 450R	Revocation of Designated Beneficiary Agreement
Form 46 PF 001	Personal Representative's Deed (Sale) Personal Representative's Deed (Sale)
Form 47 PF 002	Personal Representative Deed of Distribution Personal Representative's Deed (Distribution)
Form 48	Beneficiary Deed
Form 49	Revocation of Beneficiary Deed
Form 53	Conservator's Deed
Form 53JT	Conservator's Deed (Joint Tenancy)
Form 984	Supplementary Affidavit

**CONSERVATOR'S DEED**

THIS DEED is dated \_\_\_\_\_, and is made between \_\_\_\_\_,  
the "Grantor," as Conservator of the estate of \_\_\_\_\_,  
Protected Person, and \_\_\_\_\_,  
the "Grantees," whose legal address is \_\_\_\_\_  
\_\_\_\_\_ of the \_\_\_\_\_  
County of \_\_\_\_\_, State of \_\_\_\_\_.

GRANTOR was appointed as Conservator of the estate of the Protected Person by the \_\_\_\_\_ Court  
in the \_\_\_\_\_ County of \_\_\_\_\_, State of Colorado, Case No. \_\_\_\_\_, on \_\_\_\_\_,  
and is now qualified and acting in such capacity.

NOW THEREFORE, pursuant to the powers conferred upon Grantor by the Colorado Probate Code, Grantor does  
hereby sell, convey, assign, transfer and set over unto the Grantees, not in tenancy in common but in joint tenancy, for and in  
consideration of the sum of \_\_\_\_\_ DOLLARS, (\$ \_\_\_\_\_),  
the following described real property, together with any improvements, situate in the \_\_\_\_\_  
County of \_\_\_\_\_, State of Colorado:

also known by street address as:  
and assessor's schedule or parcel number:

with all its appurtenances.

**IN WITNESS WHEREOF**, the Grantor has executed this deed on the date set forth above.

\_\_\_\_\_  
\_\_\_\_\_  
as Conservator of the estate of  
\_\_\_\_\_  
Protected Person

STATE OF COLORADO )  
 ) ss.  
\_\_\_\_\_ County of \_\_\_\_\_ )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_,  
\_\_\_\_\_, as Conservator of the estate of \_\_\_\_\_, Protected Person.

Witness my hand and official seal.  
My commission expires:

\_\_\_\_\_  
Notary Public



**CONSERVATOR'S DEED**

THIS DEED is dated \_\_\_\_\_, and is made between \_\_\_\_\_, the "Grantor," as Conservator of the estate of \_\_\_\_\_, Protected Person, and \_\_\_\_\_ (whether one, or more than one), the "Grantee," whose legal address is \_\_\_\_\_ of the \_\_\_\_\_ County of \_\_\_\_\_, State of \_\_\_\_\_.

GRANTOR was appointed as Conservator of the estate of the Protected Person by the \_\_\_\_\_ Court in the \_\_\_\_\_ \*County of \_\_\_\_\_, State of Colorado, Case No. \_\_\_\_\_, on \_\_\_\_\_, and is now qualified and acting in such capacity.

NOW THEREFORE, pursuant to the powers conferred upon Grantor by the Colorado Probate Code, Grantor does hereby sell, convey, assign, transfer and set over unto the Grantee, for and in consideration of the sum of \_\_\_\_\_ DOLLARS, (\$ \_\_\_\_\_), the following described real property, together with any improvements, situate in the \_\_\_\_\_ County of \_\_\_\_\_, State of Colorado:

also known by street address as:  
and assessor's schedule or parcel number:

with all its appurtenances.

**IN WITNESS WHEREOF**, the Grantor has executed this deed on the date set forth above.

\_\_\_\_\_  
\_\_\_\_\_  
as Conservator of the estate of  
\_\_\_\_\_  
Protected Person

STATE OF COLORADO  
\_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_, as Conservator of the estate of \_\_\_\_\_, Protected Person.

Witness my hand and official seal.  
\_\_\_\_\_  
Notary Public  
My commission expires: \_\_\_\_\_

\* Insert "City and" if applicable.

**PERSONAL REPRESENTATIVE'S DEED**  
(Distribution)

THIS DEED is made by \_\_\_\_\_ as Personal Representative of the Estate of \_\_\_\_\_ deceased, Grantor, to \_\_\_\_\_ Grantee, whose legal address is \_\_\_\_\_ of the \_\_\_\_\_ \*County of \_\_\_\_\_, State of \_\_\_\_\_.

WHEREAS, the decedent died on the date of \_\_\_\_\_ and the Grantor was duly appointed Personal Representative of said Estate by the \_\_\_\_\_ Court in and for the \_\_\_\_\_ County of \_\_\_\_\_ and State of Colorado, Probate No. \_\_\_\_\_, on the date of \_\_\_\_\_, and is now qualified and acting in said capacity.

NOW THEREFORE, pursuant to the powers conferred upon Grantor by the Colorado Probate Code, Grantor does hereby convey, assign, transfer and release unto Grantee (in joint tenancy)\*\* as the person entitled to distribution, the following described real property situate in the \_\_\_\_\_ County of \_\_\_\_\_, State of Colorado;

also known by street and number as:  
assessor's schedule or parcel number:

With all appurtenances.

As used herein, the singular includes the plural and the plural the singular.

Executed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_, Personal Representative of the Estate of  
\_\_\_\_\_ Deceased

STATE OF COLORADO

\_\_\_\_\_ COUNTY OF \_\_\_\_\_ ss.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_ as Personal Representative of the Estate of \_\_\_\_\_, Deceased.

Witness my hand and official seal.

My commission expires: \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\*If in Denver, insert "City and".

\*\* Strike as required

\_\_\_\_\_  
Name and Address of Person Creating Newly Created Legal Description (§ 38-35-106.5, C.R.S.)

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address:	<b>▲ COURT USE ONLY ▲</b>
<b>In the Matter of the Estate of:</b>  <b>Deceased</b>	
Attorney or Party Without Attorney (Name and Address):   Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	
<b>REQUEST FOR FAMILY ALLOWANCE AND EXEMPT PROPERTY</b>	

1. I, \_\_\_\_\_ (name), state that I am the:

- surviving spouse or partner in a civil union;
- legal representative for \_\_\_\_\_, a minor or dependent child;
- adult dependent child; or
- legal representative for \_\_\_\_\_, an adult dependent child

of the decedent, who died on \_\_\_\_\_ (date), a resident of \_\_\_\_\_ County, Colorado.

2. Additionally I state:

- There are no minor or dependent children of the decedent of whom I am aware; or
- There are minor or dependent children of the decedent and
  - all of the minor or dependent children live with the surviving spouse or partner in a civil union; or
  - one or more of the decedent's minor or dependent children do not live with the surviving spouse or partner in a civil union.

**456812408.** I request the personal representative of this estate pay the **Family Allowance** under §15-11-404, C.R.S. as follows:

- to \_\_\_\_\_ (name of surviving spouse or partner in a civil union) as follows:
  - \$ \_\_\_\_\_ per month for \_\_\_\_\_ months; or
  - \$ \_\_\_\_\_ as a lump sum.

- to \_\_\_\_\_ (name of legal representative) on behalf of \_\_\_\_\_ (name of minor child): as follows:
  - \$ \_\_\_\_\_ per month for \_\_\_\_\_ months; or
  - \$ \_\_\_\_\_ as a lump sum.
- to \_\_\_\_\_ (name of adult dependent child) as follows:
  - \$ \_\_\_\_\_ per month for \_\_\_\_\_ months; or
  - \$ \_\_\_\_\_ to as a lump sum.
- to \_\_\_\_\_ (name of legal representative) on behalf of \_\_\_\_\_ (name of adult dependent child) as follows:
  - \$ \_\_\_\_\_ per month for \_\_\_\_\_ months; or
  - \$ \_\_\_\_\_ to as a lump sum.

**456812409.** I request that the personal representative of this estate transfer the following as **Exempt Property** under § 15-11-403, C.R.S.:

- to the surviving spouse or partner in a civil union
  - the amount of \$ \_\_\_\_\_ as a lump sum; and/or
  - the following items that total \$ \_\_\_\_\_ in value:
    - \_\_\_\_\_
    - \_\_\_\_\_
    - \_\_\_\_\_

**Or, if there is no surviving spouse or partner in a civil union:**

- to \_\_\_\_\_ (name of legal representative) on behalf of \_\_\_\_\_ (name of minor child) as follows:
  - The amount of \$ \_\_\_\_\_ as a lump sum; and/or
  - The following items that total \$ \_\_\_\_\_ in value:
    - \_\_\_\_\_
    - \_\_\_\_\_
    - \_\_\_\_\_
- to \_\_\_\_\_ (name of adult dependent child) as follows:
  - The amount of \$ \_\_\_\_\_ as a lump sum; and/or
  - The following items that total \$ \_\_\_\_\_ in value:
    - \_\_\_\_\_
    - \_\_\_\_\_
    - \_\_\_\_\_
- to \_\_\_\_\_ (name of legal representative) on behalf of \_\_\_\_\_ (name of adult dependent child) as follows:
  - The amount of \$ \_\_\_\_\_ as a lump sum; and/or
  - The following items that total \$ \_\_\_\_\_ in value:
    - \_\_\_\_\_
    - \_\_\_\_\_
    - \_\_\_\_\_

456812410.

T

his request is made within the earlier of one year after date of death or within six months after the Notice to Creditors by Publication that was first published on \_\_\_\_\_.

**VERIFICATION**

I verify the facts set forth in this document are true as far as I know or am informed. I understand that penalties of perjury follow deliberate falsification of the facts stated herein. (§15-10-310, C.R.S.)

\_\_\_\_\_  
Signature Date

**RECEIPT**

I acknowledge receipt of the above Request for Allowances on \_\_\_\_\_ (date).

\_\_\_\_\_  
Signature of Date  
Personal Representative

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date), a copy of this Request for Family Allowance and Exempt Property was served on each of the following:

Name and Address	Relationship to Decedent	Manner of Service*

**\*Insert one of the following: Hand Delivery, First-Class Mail, Certified Mail, E-Served or Faxed.**

\_\_\_\_\_  
Signature of person certifying service

**Notes:**

1. The Exempt Property election is only available to a spouse or partner in a civil union, if there is one; otherwise to dependent children.

2. The request is not required to be filed with the Court, although it must be made to the Personal Representative. A written request is not required by statute, but to prove the timing of the request, a writing is recommended.



**459277154.** Petitioner retains his/her right to withdraw this petition at any time prior to a final determination by the Court pursuant to §15-11-211(4), C.R.S.

**VERIFICATION**

I verify the facts set forth in this document are true as far as I know or am informed. I understand that penalties of perjury follow deliberate falsification of the facts stated herein. (§15-10-310, C.R.S.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date), a copy of this Petition for Elective Share was served on each of the following:

<b>Name and Address</b>	<b>Relationship to Decedent</b>	<b>Manner of Service*</b>

**\*Insert one of the following: Hand Delivery, First-Class Mail, Certified Mail, E-Served or Faxed.**

\_\_\_\_\_  
Signature of person certifying service

**Notes:**

1. This Petition must be filed with the Court and a copy mailed to the personal representative, if any, within the due dates stated in paragraph 2 above.
2. When a hearing is scheduled, a copy of the Petition and Notice of Hearing must be served on “persons interested in the estate and distributees and recipients of the augmented estate whose interests may be adversely affected” prior to the hearing date, giving sufficient notice.
3. The percentage in § 15-11-203, C.R.S. based on the length of the marriage, is applied to the “marital-property portion” (one-half) of the augmented estate.
4. A supplemental elective share applies if the marriage or civil union was less than one full year, or insufficient assets have passed to or are owned by the surviving spouse or partner in a civil union.



<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court  _____ County, Colorado Court Address:	<b>▲ COURT USE ONLY ▲</b>
<b>In the Matter of the Estate of:</b>    <b>Deceased</b>	
Case Number:  Division:                      Courtroom:	
<b>ORDER DETERMINING ELECTIVE SHARE</b>	

Upon consideration of the Petition for Elective Share filed by \_\_\_\_\_, petitioner, on \_\_\_\_\_ (date),

**The Court FINDS that:**

1. Venue is proper;
2. Any required notices have been given or waived;
3. Petitioner is entitled to receive the elective share as follows:
  - The parties have reached a Stipulation as to the petitioner’s appropriate elective share, a copy of which is attached; or
  - The parties have not reached a Stipulation and therefore the Court finds that the petitioner’s elective share is as follows:
    - a. Petitioner and decedent were married or partners in a civil union for \_\_\_\_\_ full years, and therefore petitioner’s elective share percentage is \_\_\_\_\_% of the marital property portion of the augmented estate;
    - b. The augmented estate is \$\_\_\_\_\_;
    - c. Petitioner’s elective share is \$\_\_\_\_\_; and
    - d. Petitioner’s elective share is partly satisfied by the following:
      - \$\_\_\_\_\_ in the spouse’s own property;
      - \$\_\_\_\_\_ passing to the spouse under the Will or by intestacy; and
      - \$\_\_\_\_\_ passing to the spouse under non-probate transfers.

**The Court further FINDS:**

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**The Court ORDERS that:**

- The Stipulation as to the satisfaction of petitioner's elective share, a copy of which is attached, is approved by the court; or
- The parties did not reach a Stipulation, and after a hearing and the findings stated above, the Court Orders that petitioner's elective share shall be satisfied by contribution of the following assets of the estate:

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**and/or**

By transfer of the following assets from the following persons:

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**The Court further ORDERS:**

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**BY THE COURT:**

\_\_\_\_\_  
 Judge    Magistrate

Dated: \_\_\_\_\_

## State of Colorado Transfer of Title Upon Death Designated Beneficiary Form C.R.S. 42-6-110.5

Upon death of the owner(s) of the motor vehicle, the beneficiary must present the death certificate(s) which must be accompanied by the DR 2009 Transfer of Title Upon Death Designated Beneficiary form and the DR 2395 Application for Title and/or Registration.

Name of Owner and Co-Owner			
Transfer on death to			
Year	Make	Model	VIN
Signature of Owner			Date
Signature of Co-Owner			Date
<p>Notary Seal</p> <p style="text-align: center;">Subscribed and affirmed, or sworn to, before me this _____ day of _____, 20____, in the county of _____, State of Colorado.</p> <p style="text-align: center;">Notary Signature _____</p>			

SUPPLEMENTARY AFFIDAVIT PURSUANT TO  
C.R.S. § 38-31-102<sup>1</sup>

STATE OF COLORADO

\_\_\_\_\_ <sup>2</sup> County of \_\_\_\_\_ <sup>3</sup>

In the matter of the title to real property, and pursuant to C.R.S. § 38-31-102, the Affiant,

\_\_\_\_\_ [NAME OF AFFIANT], being first duly sworn upon oath or by affirmation, states

that Affiant is of legal age and has personal knowledge of the facts stated herein and that the person referred to

in the certificate or verification of death recorded on \_\_\_\_\_ at Reception No.

\_\_\_\_\_, in the Clerk and Recorder's Office of \_\_\_\_\_ County, Colorado; or

in the attached certificate or verification of death<sup>4</sup>,

is one and the same person as \_\_\_\_\_ [NAME OF DECEASED] who is

named in the instrument recorded on \_\_\_\_\_ at Reception No. \_\_\_\_\_, in the Clerk and

Recorder's Office of \_\_\_\_\_ County, Colorado, in the following described real property situate

in the \_\_\_\_\_ County of \_\_\_\_\_ and State of Colorado, to wit:

[LEGAL DESCRIPTION OF PROPERTY] <sup>5</sup>

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<sup>1</sup> *Purpose of Affidavit.* This affidavit is designed to comply with the requirements of C.R.S. § 38-31-102, as amended in 2016, which provides that a certificate or verification of death of a joint tenant, life tenant, owner of real property under a beneficiary deed, or any other person whose interest in real property terminates upon their death to the same extent as a joint tenant, may be recorded in the county where the real property is located, together with a supplementary affidavit.

<sup>2</sup> If this affidavit is being notarized in Denver or Broomfield, this field should read "City and". If this affidavit is being notarized in any other county, this field should be left blank.

<sup>3</sup> The county in which the oath is administered to the affiant or the acknowledgement is taken should be entered in this field.

<sup>4</sup> *Order of Recordings.* The decedent's certificate or verification of death may either be recorded as an attachment to this affidavit or as a separate prior recording. If the decedent's certificate or verification of death is recorded as a separate prior recording, the reception number of the recorded decedent's certificate or verification of death should be stated in this affidavit.

<sup>5</sup> The legal description of the property being referenced in this affidavit should be same as the legal description of the property on the deed vesting title in the relevant joint tenancy, life estate, or beneficiary deed. Do not rely on the property description provided by a county assessor's office. A schedule with the property's legal description may also be attached to this affidavit. When doing so, this field should read "See attached Schedule [SCHEDULE NUMBER/LETTER]." As an alternative, this field may refer to the property description on the deed vesting title in the relevant joint tenancy, life estate, or beneficiary deed.

also known by street and number as: \_\_\_\_\_ [ADDRESS OF REAL ESTATE]  
[Assessor's Parcel Number: \_\_\_\_\_] <sup>6</sup>

\_\_\_\_\_  
Affiant

\_\_\_\_\_  
[PRINTED NAME OF AFFIANT]

Subscribed and sworn to or affirmed before me by Affiant, \_\_\_\_\_, on  
\_\_\_\_\_, in the \_\_\_\_\_ <sup>7</sup> County of \_\_\_\_\_ <sup>8</sup>.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public <sup>9</sup>

\_\_\_\_\_  
<sup>6</sup> Including an assessor's parcel number in this field is optional.

<sup>7</sup> If this affidavit is being notarized in Denver or Broomfield, this field should read "City and". If this affidavit is being notarized in any other county, this field should be left blank.

<sup>8</sup> The county in which the oath is administered to the affiant or the acknowledgement is taken should be entered in this field.

<sup>9</sup> Pursuant to C.R.S. § 12-55-112(1)(b), the notary's commission expiration date must appear on the notary's seal. If the notary's seal does not include the notary's commission expiration date, the notary should write "My Commission Expires [DATE OF NOTARY'S COMMISSION EXPIRATION]".

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 433, § 1, effective July 1. **L. 2010:** Entire section amended, (SB 10-199), ch. 374, p. 1754 § 23, effective July 1. **L. 2017:** (1) amended, (SB 17-223), ch. 158, p. 560, § 15, effective August 9.

**Cross references:** For provisions relating to the time of taking effect or the provisions for transition of this code, see § 15-17-101.

■ **15-22-107. Recording - duties of the county clerk and recorder - fee.** (1) A signed and acknowledged designated beneficiary agreement shall be recorded with the county clerk and recorder in the county in which one of the parties resides. The designated beneficiary agreement shall be effective as of the date and time as received for recording by the county clerk and recorder. The county clerk and recorder shall assess a recording fee for recording the designated beneficiary agreement in that county, a fee for issuing two certified copies of the designated beneficiary agreement that indicate the date and time of recording with the county, and a fee for taking acknowledgments, if applicable, as provided in section 30-1-103, C.R.S. All fees collected by the county clerk and recorder shall be deposited in the county clerk's fee fund maintained as required in section 30-1-119, C.R.S. The county clerk and recorder may require the person recording the designated beneficiary agreement to indicate the mailing address to which the original document should be returned after recording.

(2) The clerk and recorder of the county is encouraged to make available copies of the statutory forms as prescribed in sections 15-22-106 and 15-22-111.

(3) The clerk and recorder of the county shall have the following duties:

(a) To indicate on the designated beneficiary agreement or a revocation of a designated beneficiary agreement the date and time that it is recorded with the clerk and recorder;

(b) To issue two certified copies of the recorded designated beneficiary agreement that indicate the date and time of the recording;

(c) To issue replacement certified copies of a designated beneficiary agreement or a revocation of a designated beneficiary agreement upon payment of a replacement fee.

(4) Designated beneficiary agreements and revocations of designated beneficiary agreements shall be

considered open records for purposes of part 2 of article 72 of title 24, C.R.S.

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 436, § 1, effective July 1.

■ **15-22-108. Designated beneficiary agreement - effect on other legal documents.** Execution of a designated beneficiary agreement shall not constitute evidence of an intent to revoke a prior will or codicil nor shall it affect any beneficiary designation, transfer, or bequest contained in any other legal documents.

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 437, § 1, effective July 1.

■ **15-22-109. Affirmation of validity of designated beneficiary agreement.** A person exercising rights or protections pursuant to a designated beneficiary agreement shall affirm the validity of a designated beneficiary agreement and disclose any knowledge of any superseding legal documents.

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 437, § 1, effective July 1.

■ **15-22-110. Reliance - immunity.** A third party who acts in good faith reliance on the affirmation of the existence of a valid designated beneficiary agreement shall not be subject to civil liability or administrative discipline for such reliance.

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 437, § 1, effective July 1.

■ **15-22-111. Revocation of a designated beneficiary agreement.** (1) A designated beneficiary agreement that has been recorded with a county clerk and recorder may be unilaterally revoked by either party to the agreement by recording a revocation with the clerk and recorder of the county in which the agreement was recorded. A revocation shall be dated, signed, and acknowledged. The revocation shall be effective on the date and time the revocation is received for recording by the county clerk and recorder. The clerk and recorder shall issue a certified copy to the party recording the revocation and shall mail a certified copy of the revocation to the last-known address of the other party to the designated beneficiary agreement.

(2) The county clerk and recorder shall assess fees, as provided in section 30-1-103, C.R.S., for recording a revocation agreement and issuing two certified copies of the revocation agreement, plus an additional amount to cover the cost of first class postage for mailing a certified copy of the revoked designated beneficiary agreement to the other party. The fees collected by the clerk and recorder shall be deposited in the county clerk’s fee fund maintained as required in section 30-1-119, C.R.S.

(3) A designated beneficiary agreement shall be deemed revoked upon the marriage or the civil union of either party. In the case of a common law marriage, a designated beneficiary agreement shall be deemed revoked as of the date the court determines that a valid common law marriage exists.

(4) The following statutory form shall be the standard form for a revocation of a designated beneficiary agreement:

**REVOCAION OF DESIGNATED BENEFICIARY AGREEMENT**

I \_\_\_\_\_ (insert your full name), reside at \_\_\_\_\_ (insert your current address) and I entered into a designated beneficiary agreement on \_\_\_\_\_ (insert the date) with the following person \_\_\_\_\_ (insert the other person’s name) whose last-known address is \_\_\_\_\_ in which I designated such person as a designated beneficiary. This designated beneficiary agreement was recorded on \_\_\_\_\_ (insert the date) in the county of \_\_\_\_\_. The indexing file number of the designated beneficiary agreement is \_\_\_\_\_. I hereby revoke that designated beneficiary agreement, effective on the date and time that this revocation is received for recording by the clerk and recorder of \_\_\_\_\_ county.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

STATE OF COLORADO  
County of \_\_\_\_\_

This document was subscribed, sworn to, and acknowledged before me on \_\_\_\_\_ date by \_\_\_\_\_

My commission expires \_\_\_\_\_  
[Seal]

\_\_\_\_\_  
Notary Public

This revocation of beneficiary agreement was recorded in my office on \_\_\_\_, \_\_\_\_, at \_\_\_\_ o’clock, and, pursuant to section 15-22-111, Colorado Revised Statutes, I mailed a copy of this revocation of beneficiary agreement to \_\_\_\_\_ at the address contained in this revocation of beneficiary agreement.

\_\_\_\_\_  
Clerk and Recorder of  
\_\_\_\_\_ County  
By: \_\_\_\_\_

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 437, § 1, effective July 1. **L. 2013:** (3) amended, (SB 13-011), ch. 49, p. 167, § 25, effective May 1.

**■ 15-22-112. Death of a designated beneficiary - effect on designated beneficiary agreement.**

(1) A designated beneficiary agreement is terminated upon the death of either of the parties to the designated beneficiary agreement; however, a right or power which a designated beneficiary agreement conferred upon a designated beneficiary survives the death of the other designated beneficiary.

(2) A party to a designated beneficiary agreement who survives a designated beneficiary may enter into a designated beneficiary agreement with a different person so long as it meets the requirements of this article.

**Source: L. 2009:** Entire article added, (HB 09-1260), ch. 107, p. 438, § 1, effective July 1.

1C. Medical Treatment -  
Community Property Rights

**REVOCATION OF  
DESIGNATED BENEFICIARY AGREEMENT**

I \_\_\_\_\_ (insert your full name), reside at \_\_\_\_\_ (insert your current address) and I entered into a designated beneficiary agreement on \_\_\_\_\_ (insert the date) with the following person \_\_\_\_\_ (insert the other person's name) whose last known address is \_\_\_\_\_ in which I designated such person as a designated beneficiary. This designated beneficiary agreement was recorded on \_\_\_\_\_ (insert the date) in the County of \_\_\_\_\_. The indexing file number of the designated beneficiary agreement is \_\_\_\_\_. I hereby revoke that designated beneficiary agreement, effective on the date and time that this revocation is received for recording by the clerk and recorder of \_\_\_\_\_ County.

\_\_\_\_\_ Date \_\_\_\_\_ Name \_\_\_\_\_

State of Colorado  
County of \_\_\_\_\_

This document was subscribed, sworn to, and acknowledged before me on \_\_\_\_\_ (date) by \_\_\_\_\_.

My commission expires \_\_\_\_\_

[seal]

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
This revocation of beneficiary agreement was recorded in my office on \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_ o'clock, and, pursuant to Section 15-22-111, Colorado Revised Statutes, I mailed a copy of this revocation of beneficiary agreement to \_\_\_\_\_ at the address contained in this revocation of beneficiary agreement.

Clerk and Recorder of \_\_\_\_\_ County

By: \_\_\_\_\_



**REVOCATION OF POWER OF ATTORNEY**

The undersigned, \_\_\_\_\_ (the Principal), on \_\_\_\_\_ (date), gave Power of Attorney to \_\_\_\_\_ (the agent), for the purposes stated in the Power of Attorney.

\*The Power of Attorney was recorded in the office of the Clerk and Recorder as follows:  
\_\_\_\_\_ (Reception No./Book and Page No.)

The undersigned now desires to terminate the Power of Attorney and revokes the Power of Attorney and all rights, powers, privileges, and immunities therein conferred upon the Agent.

Executed on \_\_\_\_\_

\_\_\_\_\_  
Principal

STATE OF \_\_\_\_\_

County of \_\_\_\_\_

This Revocation of Power of Attorney was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public  
My commission expires: \_\_\_\_\_

\*Check only if Power of Attorney was recorded.

**SUPPLEMENTARY AFFIDAVIT PURSUANT TO C.R.S. § 38-31-102<sup>1</sup>**

STATE OF COLORADO

\_\_\_\_\_ <sup>2</sup> County of \_\_\_\_\_ <sup>3</sup>

In the matter of the title to real property, and pursuant to C.R.S. § 38-31-102, the Affiant, \_\_\_\_\_ [NAME OF AFFIANT], being first duly sworn upon oath or by affirmation, states that Affiant is of legal age and has personal knowledge of the facts stated herein and that the person referred to

in the certificate or verification of death recorded on \_\_\_\_\_ at Reception No. \_\_\_\_\_, in the Clerk and Recorder’s Office of \_\_\_\_\_ County, Colorado; or

in the attached certificate or verification of death<sup>4</sup>,

is one and the same person as \_\_\_\_\_ [NAME OF DECEASED] who is named in the instrument recorded on \_\_\_\_\_ at Reception No. \_\_\_\_\_, in the Clerk and Recorder’s Office of \_\_\_\_\_ County, Colorado, in the following described real property situate in the \_\_\_\_\_ County of \_\_\_\_\_ and State of Colorado, to wit:

[LEGAL DESCRIPTION OF PROPERTY]<sup>5</sup>

<sup>1</sup>. *Purpose of Affidavit.* This affidavit is designed to comply with the requirements of C.R.S. § 38-31-102, as amended in 2016, which provides that a certificate or verification of death of a joint tenant, life tenant, owner of real property under a beneficiary deed, or any other person whose interest in real property terminates upon their death to the same extent as a joint tenant, may be recorded in the county where the real property is located, together with a supplementary affidavit.

<sup>2</sup>. If this affidavit is being notarized in Denver or Broomfield, this field should read “City and”. If this affidavit is being notarized in any other county, this field should be left blank.

<sup>3</sup>. The county in which the oath is administered to the affiant or the acknowledgement is taken should be entered in this field.

<sup>4</sup>. *Order of Recordings.* The decedent’s certificate or verification of death may either be recorded as an attachment to this affidavit or as a separate prior recording. If the decedent’s certificate or verification of death is recorded as a separate prior recording, the reception number of the recorded decedent’s certificate or verification of death should be stated in this affidavit.

<sup>5</sup>. The legal description of the property being referenced in this affidavit should be same as the legal description of the property on the deed vesting title in the relevant joint tenancy, life estate, or beneficiary deed. Do not rely on the property description provided by a county assessor’s office. A schedule with the property’s legal description may also be attached to this affidavit. When doing so, this field should read “See attached Schedule [SCHEDULE NUMBER/LETTER].” As an alternative, this field may refer to the property description on the deed vesting title in the relevant joint tenancy, life estate, or beneficiary deed.

also known by street and number as: \_\_\_\_\_ [ADDRESS OF REAL ESTATE]  
[Assessor's Parcel Number: \_\_\_\_\_]<sup>6</sup>

\_\_\_\_\_  
Affiant

\_\_\_\_\_  
[PRINTED NAME OF AFFIANT]

Subscribed and sworn to or affirmed before me by  
Affiant, \_\_\_\_\_,  
on \_\_\_\_\_, in the \_\_\_\_\_  
County of \_\_\_\_\_<sup>8</sup>, State of \_\_\_\_\_,

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public<sup>9</sup>

\_\_\_\_\_  
<sup>6</sup>. Including an assessor's parcel number in this field is optional.

<sup>7</sup>. If this affidavit is being notarized in Denver or Broomfield, this field should read "City and". If this affidavit is being notarized in any other county, this field should be left blank.

<sup>8</sup>. The county in which the oath is administered to the affiant or the acknowledgement is taken should be entered in this field.

<sup>9</sup>. Pursuant to C.R.S. § 12-55-112(1)(b), the notary's commission expiration date must appear on the notary's seal. If the notary's seal does not include the notary's commission expiration date, the notary should write "My Commission Expires [DATE OF NOTARY'S COMMISSION EXPIRATION]".

**TRUSTEE'S DEED**

THIS DEED is dated \_\_\_\_\_, and is made between \_\_\_\_\_, the "Grantor," as Trustee of the \_\_\_\_\_ Trust dated \_\_\_\_\_, and \_\_\_\_\_ (whether one, or more than one), the "Grantee," whose legal address is \_\_\_\_\_ of the \_\_\_\_\_ County of \_\_\_\_\_, State of \_\_\_\_\_.

WITNESS, that the Grantor, as Trustee and pursuant to the powers conferred upon the Trustee by the Colorado Probate Code, does hereby sell, convey, assign, transfer and set over unto the Grantee (in joint tenancy with right of survivorship)\* for and in consideration of the sum of \_\_\_\_\_ DOLLARS, (\$ \_\_\_\_\_), (as the person entitled to distribution of the property pursuant to the terms of the Trust)\* the real property situate in the \_\_\_\_\_ County of \_\_\_\_\_ and State of Colorado, described as follows:

also known by street address as:  
and assessor's schedule or parcel number:

with all the appurtenances hereunto belonging.

**IN WITNESS WHEREOF**, the Grantor has executed this deed the date set forth above.

GRANTOR

\_\_\_\_\_  
Trustee of the \_\_\_\_\_  
Trust, dated \_\_\_\_\_

STATE OF COLORADO

\_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ as Trustee of \_\_\_\_\_ Trust dated \_\_\_\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public  
My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Name and Address of Person Creating Newly Created Legal Description (§38-35-106.5, C.R.S.)

\*Strike if applicable.



OR

a conservator for the respondent has already been appointed.

OR

another fiduciary for the respondent is already in place.

**The Court Orders:**

1. The petitioner is authorized to accept the total amount of \$ \_\_\_\_\_ as full and final settlement of the personal injury claim.

2. This authorization includes the acceptance of \$ \_\_\_\_\_ to be paid by \_\_\_\_\_ (name).

3. The petitioner is further authorized to execute the Settlement Agreement(s) and Releases with \_\_\_\_\_ (name) and fully discharge said claims and to pay the following out of the proceeds:

\$ \_\_\_\_\_ to \_\_\_\_\_ (name of payee).

\$ \_\_\_\_\_ to \_\_\_\_\_ (name of payee).

\$ \_\_\_\_\_ in attorney fees to \_\_\_\_\_ (name of attorney/law firm).

\$ \_\_\_\_\_ in costs to \_\_\_\_\_ (name of attorney/law firm).

Other:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. The net settlement amount of \$ \_\_\_\_\_ is to be:

deposited into a restricted account from which there shall be no withdrawals without prior Court approval. The funds shall be deposited within 45 days of the issuance of this Order and the petitioner shall file an acknowledgment of said deposit by the filing of JDF 867 by \_\_\_\_\_ (date).

deposited with the Clerk of Court into the Court Registry to be held in a special separate federally insured, restricted interest-bearing account until the respondent reaches the age of twenty-one (21). Deposit must be made within 45 days. There shall be no withdrawals without prior Court approval.

administered in accordance with the Order Appointing Conservator issued on \_\_\_\_\_ (date).

other: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. The Court further ORDERS that there shall be no payment of attorney fees until the Court has received and acknowledged the deposit of the net settlement amount.

Date: \_\_\_\_\_

\_\_\_\_\_  
Judge/Magistrate

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address: _____  <b>In the Interest of:</b> _____  <b>Respondent</b> _____		▲ <b>COURT USE ONLY</b> ▲
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____   E-mail: _____ FAX Number: _____   Atty. Reg. #: _____		
<b>PETITION FOR APPROVAL OF SETTLEMENT OF CLAIMS  PURSUANT TO RULE 62 OF THE COLORADO RULES OF PROBATE PROCEDURE</b>		

\_\_\_\_\_ (name), the petitioner, pursuant to Rule 16 of the Colorado Rules of Probate Procedure, petitions the court as follows:

**Section I – Venue, Jurisdiction, and Parties**

**1. Venue for this proceeding is proper in this county because the respondent:**

- resides in this county.
- does not reside in this state, but has property in this county.

**2. Information about the petitioner:**

Name: \_\_\_\_\_ Relationship to respondent: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_  
Email address: \_\_\_\_\_

**3. Information about respondent:**

Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_ Date of birth: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_  
Email address: \_\_\_\_\_

**4. Information about respondent's spouse, partner in a civil union, or adult who has resided with respondent for more than six months within one year before the filing of this petition:**

Name: \_\_\_\_\_ Relationship to respondent: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_  
Email address: \_\_\_\_\_

**5. Information about respondent's parents (if respondent is a minor), legal guardian, custodian, trustee, agent under power of attorney, or court-appointed guardian or conservator**

Name: \_\_\_\_\_ Relationship to respondent: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_  
Email address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to respondent: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_  
Email address: \_\_\_\_\_

\*Note: If a parent cannot be found, please check the rules on Notice by Publication.

If there is a court-appointed fiduciary, the case information and reason for the fiduciary's appointment is as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 2 – Claims and Liabilities**

**6. The date and a brief description of the event or transaction giving rise to the claim:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**7. Information about each party against whom respondent may have a claim:**

Name: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_

Name: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Primary phone #: \_\_\_\_\_  
Mailing address, if different: \_\_\_\_\_  
Primary phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_

**8. The legal basis for each of the respondent's claims are as follows:**

\_\_\_\_\_  
\_\_\_\_\_

**9. The defenses and/or counterclaims, if any, to the respondent's claims are as follows:**

\_\_\_\_\_  
\_\_\_\_\_

**10. Information for each insurance company involved in the claim, the type of policy, the policy limits and the identity of the insured:**

Name of insurance company: \_\_\_\_\_ Name of insured: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Contact person: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Type of policy: \_\_\_\_\_ Policy limits: \_\_\_\_\_

Name of insurance company: \_\_\_\_\_ Name of insured: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Contact person: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Type of policy: \_\_\_\_\_ Policy limits: \_\_\_\_\_

**Section 3 – Damages**

**11. A description of the respondent’s injuries:**

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**12. The amount of time missed by the respondent from school or employment:**

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**13. A summary of lost income resulting from respondent’s injuries:**

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**14. A summary of any damage to respondent’s property:**

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**15. A summary of any expenses incurred for medical or other care provider services as a result of the respondent’s injuries:**

	<b>Name of Provider</b>	<b>Expenses</b>	<b>Insurances Paid</b>	<b>Source of Payment (if any)</b>	<b>Outstanding Expenses</b>
	<b>Total</b>				
		\$	\$	\$	\$

**Section 4 – Medical Status**

16. A description of respondent’s current condition including but not limited to the nature and extent of any disability, disfigurement, or physical or psychological impairments, and any current treatments and/or therapies:  Current Physician Letter attached

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17. An explanation of respondent’s prognosis and any anticipated treatments and/or therapy:

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**Section 5 – Status of Claims**

18. For this claim and any other related claim, the status of the claim and if any civil action has been filed, the court, case number, and parties:

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19. Information about each party having a subrogation right against this claim or any related claim including any state or federal agency paying or planning to pay benefits to or for respondent and the amount of each subrogation:

Name of claimant/subrogation holder: \_\_\_\_\_ Amount of subrogation: \$ \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of claimant/subrogation holder: \_\_\_\_\_ Amount of subrogation \$ \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Phone #: \_\_\_\_\_

20. A summary of efforts to negotiate any subrogation rights against this claim or any related claim:

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**Section 6 – Proposed Settlement, Payment Terms and Proposed Disposition of Settlement Proceeds**

**21. Information about each party making and receiving payment under the proposed settlement:**

Name of party/entity making payment: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Name of party/entity receiving payment: \_\_\_\_\_

Name of party/entity making payment: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Name of party/entity receiving payment: \_\_\_\_\_

Name of party/entity making payment: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Name of party/entity receiving payment: \_\_\_\_\_

**22. The settlement amount and proposed disposition, including any restrictions on the accessibility of the funds.**

	Description	Amount
<b>A</b>	Gross Settlement Amount	\$
<b>B</b>	Attorney Fees	\$
<b>C</b>	Attorney Costs	\$
<b>D</b>	Payment of Medical Bills per section 15	\$
<b>E</b>	Payment of Subrogation Claim per section 19	\$
<b>F</b>	TOTAL PAYOUTS (B+C+D+E)	\$
<b>G</b>	Net Settlement Proceeds (A-F)	\$

**23. The details of any structured settlement, annuity, insurance policy or trust instrument, including the terms and payment structure and the identity of the trustee or entity administering such arrangements:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**24. The requested attorney fees and costs to be paid from the settlement proceeds are summarized as follows:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**25. Whether there is a need for continuing court supervision, the appointment of a fiduciary, or the continuation of an existing fiduciary appointment:**

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**26. The following documents are attached to this petition:**

- Attorney fee agreement
- Attorney statement of costs
- Attorney billing records, billing summary or attorney fee affidavit
- Written statement by physician or other health care provider
- Proposed settlement agreement(s)/releases
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_

**27. An interpreter is requested for the following person(s): \_\_\_\_\_ (Language Need(s): \_\_\_\_\_)**

WHEREFORE, petitioner requests that after notice and hearing, the Court

- find that the proposed settlement of the claim is in the best interests of the respondent;
- find that the Court authorize the acceptance of \$ \_\_\_\_\_ in full settlement of the respondent's personal injury claim;
- authorize payment of \$ \_\_\_\_\_ to be paid out of the settlement proceeds for any outstanding claims, attorney fees and costs per section 6; and
- authorize disposition of the net proceeds of the settlement in the manner set forth in this Petition.

Respectfully submitted on \_\_\_\_\_ (date).

\_\_\_\_\_  
Signature of Attorney for petitioner

or

\_\_\_\_\_  
Signature of petitioner