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| District Court Denver Probate Court\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, ColoradoCourt Address:**In the Interest of:****Protected Person**  | COURT USE ONLYCase Number:Division: Courtroom: |
| ACKNOWLEDGMENT OF RESPONSIBILITIES CONSERVATOR AND/OR GUARDIAN |

I, (name), acknowledge that I was appointed as the conservator and/or guardian for (ward or protected person) on (date) and I understand that Letters of Guardianship/Conservatorship will not be issued until this form is signed and provided to the court. I agree to comply with statutory and court requirements and understand that I am responsible for preparing and filing reports and/or plans with the court and providing copies to all interested persons as identified in the Order of Appointment.

I have received the following information to review regarding my responsibilities.

User’s Manual for Guardians User’s Manual for Conservators

Viewed Informational Modules/DVD/Video Pamphlets

Attendance at mandatory training session on (date).

Other:

**Acknowledgment of Responsibilities:**

1. I am responsible for promptly providing the court with any changes to my mailing address, email address, and telephone number by filing a Notice of Change Regarding Contact Information (JDF 725)**.**
2. I am responsible for maintaining supporting documentation for all receipts into the accounts and all disbursements out of the accounts under my control during the duration of my appointment. Supporting documentation includes bank statements and check copies, credit card statements and receipts, sales receipts, and other such forms of proof that support my reports. I understand that the court or any interested persons may request copies at any time.
3. If funds must be placed in a restricted account, I understand that any withdrawals require a court order.

The Acknowledgment of Deposit of Funds to Restricted Account (JDF 867) must be returned to the court as documentation that the funds were deposited, within 45 days or by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date).

All requests for withdrawal must be in writing by submitting a Motion to Withdraw Funds (JDF 868).

The Restricted Account Report (JDF 896) is due on (date) and every year thereafter on such day and month, unless I am notified by the court.

1. I understand that the following reports and/or plans are due on (date).

Initial Guardian’s Report/Care Plan - Adult (JDF 850)

Conservator’s Financial Plan with Inventory and Motion for Approval (JDF 882)

1. I understand that the following reports are due on (date) and every year thereafter on such day and month, unless I am notified by the court:

Guardian’s Report - Minor (JDF 834)

Guardian’s Report - Adult (JDF 850) Conservator’s Report (JDF 885)

1. I understand that as a court-appointed guardian and/or conservator, I am required by law to report any known or suspected abuse, neglect, or exploitation of any at-risk elder (a person 70 years of age or older) to law enforcement. I understand that criminal penalties may result from failure to comply with this law. Please refer to § 18-6.5-108, C.R.S. for additional information.

**7.** I understand that all reports must be filed on the most current version of the form and that the forms are available on the state court website: <http://www.courts.state.co.us>

 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.

**My signature below indicates that I have read and understand my responsibilities as a newly appointed guardian and/or conservator.**

**VERIFICATION**

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

Executed on the \_\_\_\_\_\_ day of Executed on the \_\_\_\_\_\_ day of

 (date) (date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_,

 (month) (year) (month) (year)

at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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(printed name) (printed name)

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(Signature of Guardian/Conservator/Successor) (Signature of Co-Guardian/Co-Conservator/Successor, if any)