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| District Court Denver Probate Court\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, ColoradoCourt Address:**In the Interest of:****Ward** | **COURT USE ONLY** |
| Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail:FAX Number: Atty. Reg. #:: | Case Number:Division Courtroom |
| **REGISTRATION AND RECOGNITION OF GUARDIANSHIP ORDERS FROM OTHER STATES** **AND SWORN STATEMENT – GUARDIAN FOR ADULT**  |

**This Registration and Recognition of Guardianship Orders from Other States and Sworn Statement – Guardian for Adult is submitted pursuant to §15-14.5-401, C.R.S of the Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act.**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, was appointed as the guardian for an adult in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

As the guardian Ihereby file with this Court the following documents:

Certified, exemplified, or authenticated copies of the foreign court’s order appointing me as guardian;

Certified, exemplified, or authenticated copies of the foreign court’s letters or other documents evidencing or affecting my authority to act as guardian;
Certified, exemplified, or authenticated copies of any bonds filed with the appointing foreign court;

Other: .

I state no petition for a guardian is pending in Colorado for the incapacitated person. The statutorily required notice to the foreign appointing court of an intent to register was given on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 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.

(Checking this box requires you to remove JDF number and copyright at the bottom of the form.)

### VERIFICATION AND ACKNOWLEDGMENT

As the foreign guardian, I swear/affirm under oath, and under penalty of perjury, that I have read the foregoing *REGISTRATION AND RECOGNITION OF GUARDIANSHIP ORDERS FROM OTHER STATES AND SWORN STATEMENT – GUARDIAN FOR ADULT* and that the statements set forth therein are true and correct to the best of my knowledge.

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

 Signature of Foreign Guardian

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

 Street

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

 City/State/Zip Code

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

 Daytime Phone Number

Subscribed and affirmed, or sworn to before me in the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_.

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Public/Deputy Clerk