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**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)

Executed on the \_\_\_\_\_ day of  
(date)

\_\_\_\_\_, \_\_\_\_\_,  
(month) (year)

\_\_\_\_\_, \_\_\_\_\_,  
(month) (year)

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

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

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(Signature of Personal Representative)

\_\_\_\_\_  
(Signature of Co-Personal Representative, if any)

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**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date), a copy of this \_\_\_\_\_ (name of document) was served as follows on each of the following:

<b>Name and Address</b>	<b>Relationship to Decedent, Ward, or Protected Person</b>	<b>Manner of Service*</b>

\*Insert one of the following: hand delivery, first-class mail, certified mail, e-service, or fax.

\_\_\_\_\_  
Signature