|  |  |
| --- | --- |
| District Court Denver Probate Court  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, Colorado  Court Address:  **In the Interest of:**  **In the Matter of the Estate of:** | COURT USE ONLY |
| Attorney or Party Without Attorney (Name and Address):  Phone Number: E-mail:  FAX Number: Atty. Reg. #: | Case Number:  Division Courtroom |
| OBJECTION | |

I, (name) as the Guardian, Conservator, Personal Representative Heir Creditor or Other Interested Person (identify relationship in case), am a party to this case and object to the document identified below filed on (date).

Motion to

Petition to

Other:

**The grounds for my objection are as follows:**

 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.)

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

                                                                                     Signature

**CERTIFICATE OF SERVICE**

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Person to Whom You are Sending this Document** | **Relationship** | **Address** | **Manner of Service\*** |
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**\*Insert one of the following: Hand Delivery, First-Class Mail, Certified Mail, E-Served or Faxed.**

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

Signature