|  |  |
| --- | --- |
| District Court Denver Probate Court\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, ColoradoCourt 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 |
| CERTIFICATE OF SERVICE  |

I certify that on (date) a copy of (title of document) 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.**

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

 Your Signature

**Note:**

This Certificate of Service cannot be used in cases where personal service is required or used. Use the Personal Service Affidavit - JDF 718 for each person required to be served personally.