

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address:  		▲ COURT USE ONLY ▲
<b>IN THE MATTER OF</b> <input type="checkbox"/> <b>THE ESTATE OF:</b>  <b>Respondent</b>		
Attorney or Party Without Attorney (Name and Address):  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____		Case Number:  Division _____ Courtroom _____
<b>NOTICE OF HEARING TO RESPONDENT</b>		

**READ IMPORTANT NOTICE**

A hearing on  Petition for Appointment of Guardian  Petition for Appointment of Conservator  
 \_\_\_\_\_

a copy of which accompanies this Notice, will be held at the following time and location or at a later date to which the hearing may be continued.

Date and Time: \_\_\_\_\_  
Courtroom or Division: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**\*\*\*\*\* IMPORTANT NOTICE\*\*\*\*\***

**The outcome of this proceeding may limit or completely take away your right to make decisions about your personal affairs or your financial affairs or both. You must appear in person unless excused by the court. The petitioner is required to make reasonable efforts to help you attend the hearing.**

**You have the right to be represented by an attorney of your choice at your own expense. If you cannot afford an attorney, one may be appointed for you at State expense. You may request a professional evaluation of your condition. You have the right to present evidence and subpoena witnesses and documents; examine witnesses, including any court-appointed physician, psychologist, or other qualified individual providing evaluations, and the court visitor; and to otherwise participate in the hearing. You may ask that the hearing be held in a manner that reasonably accommodates you. You have the right to request that the hearing be closed, but the hearing may not be closed over your objection.**

\_\_\_\_\_  
Signature of Attorney for or Person Giving Notice

**Personal Service Affidavit**

State of Colorado  
County of \_\_\_\_\_

I served a copy of the foregoing Notice of Hearing to Respondent, together with a copy of the petition, on the following:

Name	Date	Place	Manner of Service
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I am over the age of eighteen (18) years, and I am not interested in nor a party to this matter.

\_\_\_\_\_  
Signature of Person Certifying Service

\_\_\_\_\_  
Name (Print or type)

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

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

NOTE: This Notice of Hearing to Respondent must be personally served on the respondent, along with a copy of the petition, at least ten (10) days prior to the hearing pursuant to §15-14-309(1) or §15-14-404(1).

Do not attach copies of the petition when filing the Notice of Hearing to Respondent with the court.