

Prepared By:

Name: _____

Address: _____

After Recording Return To:

Name: _____

Address: _____

Space above this line for recorder's use only

COLORADO BENEFICIARY DEED

(§§ 15-15-401 et seq., Colorado Revised Statutes)

CAUTION: THIS DEED MUST BE RECORDED PRIOR TO THE DEATH OF THE GRANTOR IN ORDER TO BE EFFECTIVE.

_____, as grantor, designates _____ as grantee-beneficiary whose address is

_____ (Note to Assessor and Treasurer: This address is for identification purposes only, all notices and tax statements should continue to be sent to grantor.)

Or, if grantee-beneficiary fails to survive grantor, grantor designates _____, as successor grantee-beneficiary whose address is _____.

Grantor transfers, sells, and conveys on grantor's death to the grantee-beneficiary, the following described real property located in the County of _____, State of Colorado:

[WRITE LEGAL DESCRIPTION HERE OR ATTACH EXHIBIT A]

Known and numbered as _____.

THIS BENEFICIARY DEED IS REVOCABLE. IT DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR. IT REVOKES ALL PRIOR BENEFICIARY DEEDS BY THIS GRANTOR FOR THIS REAL PROPERTY EVEN IF THIS BENEFICIARY DEED FAILS TO CONVEY ALL OF THE GRANTOR'S INTEREST IN THIS REAL PROPERTY. WARNING: EXECUTION OF THIS BENEFICIARY DEED MAY DISQUALIFY THE GRANTOR FROM BEING DETERMINED ELIGIBLE FOR, OR FROM RECEIVING, MEDICAID UNDER TITLE 25.5, COLORADO REVISED STATUTES.

WARNING: EXECUTION OF THIS BENEFICIARY DEED MAY NOT AVOID PROBATE.

Executed this _____. (Date)

Grantor's Signature

Grantor's Name

ACKNOWLEDGMENT.

STATE OF _____)
COUNTY OF _____)

I, the undersigned, a _____ in and for said County, in said State, hereby certify that _____, whose name is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they executed the same voluntarily on the day the same bears date.

Given under my hand this _____ (mm/dd/yyyy)

Officer

My Commission Expires: _____