

IN THE CIRCUIT COURT FOR _____ COUNTY, FLORIDA
PROBATE DIVISION

IN RE: ESTATE OF

File No. _____

Deceased

STATEMENT OF CLAIM BY _____

The claimant, _____, hereby presents for filing against the above estate this statement of claim and alleges:

1. The basis for the claim is:
2. The amount of the claim is \$ _____, which amount is now due, or, if not due, will become due on _____.
3. The name and address of the claimant and the name and address of the claimant's attorney, if any, are as set forth below.
4. The claim is or is not (*delete one*) contingent or unliquidated. If contingent or unliquidated, the nature of the uncertainty is:
5. The claim is or is not (*delete one*) secured. If secured, the security consists of _____

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge.

SIGNED ON _____, _____.

Claimant

(*printed name*)
address _____

Attorney for Claimant

(*printed name*)
Florida Bar No. _____
address _____

Telephone: _____

Copy mailed to attorney for the Personal Representative on _____, _____.

CLERK OF THE CIRCUIT COURT

By: _____

(*printed name*)

MUST BE FILED IN DUPLICATE