

IN THE CIRCUIT COURT OF GREENE COUNTY, MISSOURI
PROBATE DIVISION

No. _____

Estate of _____, _____
Deceased - Disabled - Minor

CLAIM AGAINST ESTATE

The applicant herein states that there is due to _____

_____ (name)

_____ (address)

from the estate of _____, _____
(Dec. - Dis. - Minor)

the sum of \$ _____ on account of _____

_____ (describe nature of claim)

An itemized statement of such claim showing dates and amounts is attached hereto along with a copy of all written documents concerning the claim.

The claimant holds security for the claims as follows: _____

Applicant states that to best of _____ knowledge and belief credit has been given to such estate for all payments and offsets to which it is entitled and that the balance claimed as above stated is justly due.

THE STATEMENTS AND REPRESENTATIONS IN THIS DOCUMENT ARE MADE UNDER OATH AND ARE TRUE AND CORRECT TO MY BEST KNOWLEDGE AND BELIEF. I UNDERSTAND THEY ARE MADE SUBJECT TO THE PENALTIES OF MAKING A FALSE AFFIDAVIT OR DECLARATION.

Signature of Claimant

Address of Claimant

Phone Number of Claimant

Fax Number of Claimant