

State of Minnesota

District Court

County _____

Judicial District: _____
Court File Number: _____
Case Type: _____

In the Matter of the Estate of:

WRITTEN STATEMENT OF CLAIM

_____,
(Full Name) Decedent

STATE OF MINNESOTA)
) SS
COUNTY OF _____)

1. My name is: _____ and I have a valid claim against this estate.
2. My address and telephone number are: _____
3. The Estate is or will become indebted to me in the amount of \$_____.
4. The nature of the claim is: _____
5. The claim arose prior to the death of the Decedent on or about _____
or after the death of the Decedent, on or about _____.
6. The claim is unsecured, or secured by: _____
7. The claim is is not based on a contract which makes a provision for interest.
8. The claim was or will be due and payable on _____.
9. If the claim is contingent or unliquidated, the nature of the uncertainty is as follows: _____
10. Under penalties for perjury, I declare that I have read this document and I know or believe its representations are true and complete.

Dated: _____

Signature
Name: _____
Street Address: _____
City/State/Zip: _____
E-mail address: _____