

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

### AFFIDAVIT OF CLAIM AGAINST THE ESTATE OF

\_\_\_\_\_

Before the undersigned authority, personally appeared \_\_\_\_\_  
 \_\_\_\_\_, who is known to me, who upon being duly sworn  
 deposes and says that he/she is \_\_\_\_\_ of  
 \_\_\_\_\_ and that the claim itemized  
 below or attached hereto is a true and correct statement of the account of  
 \_\_\_\_\_ against the  
 estate of \_\_\_\_\_, deceased; that he/she  
 has knowledge of the correctness thereof; that the amount claimed is justly due or to  
 become due after allowing all just credit, claims, and set-offs: BALANCE:  
 \$ \_\_\_\_\_

\_\_\_\_\_  
 Claimant  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone No. \_\_\_\_\_

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

Sworn to and subscribed before me, the undersigned authority, this  
 \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
 Notary Public  
 My Commission expires: