

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA  
PROBATE DIVISION**

**CLAIM AGAINST THE DECEDENT'S ESTATE**

The creditor named below certifies that there is owing by \_\_\_\_\_ deceased, Admin. No. \_\_\_\_\_, in accordance with the statement of account attached hereto as a part hereof, the sum of \_\_\_\_\_ (\$\_\_\_\_\_), together with interest at the rate of \_\_\_\_\_ from \_\_\_\_\_ until paid, and that the aforesaid account is correct as stated and is unpaid \* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On behalf of the creditor named below, I do solemnly declare and affirm under penalty of law that the contents of the foregoing document are true and correct to the best of my knowledge and belief.

Decedent died on \_\_\_\_\_ and was a resident of \_\_\_\_\_  
(date of death)

Name of Creditor:  
\_\_\_\_\_

Signature of Creditor or person authorized to  
make verification on behalf of creditor

Address:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

**INSTRUCTIONS**

- \* In addition to completing all pertinent blank spaces on the form, the claimant shall use these lines to state:
1. The due date if the claim is not yet due;
  2. The nature of the contingency, if the claim is contingent;
  3. The description of the security, if the claim is secured;
  4. Nature of claim.

All claims presented to the Register of Wills must be accompanied by check or money order in the amount of \$5.00, payable to the Register of Wills, D.C.

I hereby certify that I have delivered or mailed, return receipt requested, a copy hereof to \_\_\_\_\_ (personal representative or attorney) this \_\_\_\_\_ day of \_\_\_\_\_, 200 \_\_\_\_.

**FOR REGISTER OF WILLS USE ONLY**  
Date Filed: \_\_\_\_\_  
Claim Docket Book: \_\_\_\_\_

By: \_\_\_\_\_  
Deputy Register of Wills

\_\_\_\_\_  
Claimant