

State of Tennessee

Franklin County

CLAIM AGAINST ESTATE OF

\_\_\_\_\_, Deceased Case No. \_\_\_\_\_

\_\_\_\_\_, Creditor

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

Quantity	Items and Nature of Claim	Amount of Claim	Credit	Unpaid Balance

(Attach documents supporting claim)

STATE OF TENNESSEE, FRANKLIN COUNTY

I (or we) make oath that the above claim is a correct, just and valid obligation of the Estate of \_\_\_\_\_, Deceased, that neither the undersigned, nor any other person in my or our behalf has received payment therefore, in whole or in part, except as is credited above, and no security has been received therefore, except as above stated.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Filed in triplicate this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Katelyn Isbell, Clerk and Master

By: \_\_\_\_\_