

**IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT,
IN AND FOR INDIAN RIVER COUNTY, FLORIDA**

IN RE: ESTATE OF:

Case Number: _____

Deceased

Division: _____

STATEMENT OF CLAIM BY _____

The undersigned hereby presents for filing against the above named estate this statement of claim and alleges:

1. The basis for the claim is _____

2. The name and address of the claimant are _____
_____ and the name and address of the claimant's attorney, if any, are as set forth below.
3. The amount of the claim is \$ _____, which amount is now due, or, if not due, will become due on _____.
4. The claim is is not contingent or unliquidated. If contingent or unliquidated, the nature of the uncertainty is _____

5. The claim is is not secured. If secured, the security consists of _____

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.

Signed on _____, _____.

Attorney for Claimant

Florida Bar Number: _____

Address: _____

Telephone: _____

Claimant

Copy mailed to attorney for the
Personal Representative on

_____, _____
CLERK OF THE CIRCUIT COURT

By: _____