

**IN THE PROBATE COURT OF CHATHAM COUNTY
STATE OF GEORGIA**

IN RE: ESTATE OF _____,

ESTATE NO. _____

DECEASED

CLAIM AGAINST THE ESTATE

TO: Personal Representative of Said Estate: _____

The undersigned, after being duly sworn, deposes and says that the Estate of the deceased is indebted to affiant in the sum of \$ _____ dollars, by reason of: _____

and as specified below:

Creditor:	
Address:	
Telephone:	
Email Address:	
Original Creditor (if different from above):	
Address (if different from above):	
Principal Balance:	\$
Applicable Interest or other Additional Charges Owed:	\$
Total Amount of Claim:	\$
Account Number (or other identifying information):	
Basis of Claim:	<input type="radio"/> Open Account <input type="radio"/> Contract <input type="radio"/> Tort <input type="radio"/> Other: _____
Invoice or Account Statement attached (or Itemization adequate to establish indebtedness)	<input type="radio"/> Yes <input type="radio"/> No

This affidavit is made pursuant to law to make a claim against said decedent and to file the same in the Probate of Chatham County, GA, so that the estate's representative may not be dismissed without satisfying the same, if owed. *Affiant understands that the Probate Court may not adjudicate the validity of the claim and that Affiant should file a claim for judgment in the appropriate court, if needed.*

The affiant further deposes and says that a copy of this affidavit and claim has been mailed to the Estate representative at the following address:

Street	City	State	Zip Code
--------	------	-------	----------

Signature of Creditor or Claimant

Printed Name of Creditor or Claimant

Company Name: _____

Address: _____

Telephone: _____

Email Address: _____

Sworn to and subscribed before me, this
____ day of _____, 20____.

NOTARY or CLERK OF PROBATE COURT