

-IN THE CIRCUIT COURT, SEVENTH JUDICIAL CIRCUIT  
IN AND FOR VOLUSIA COUNTY, FLORIDA  
PROBATE DIVISION

**IN RE: Estate of**

**FILE NUMBER:** \_\_\_\_\_

**DIVISION:**

**Deceased**

**STATEMENT OF CLAIM**

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

1. The basis of the claim is \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.
2. The name and address of claimant is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_;  
and the name and address of the claimant's agent or attorney, if any, are \_\_\_\_\_  
\_\_\_\_\_.
3. The amount of the claim is \_\_\_\_\_  
which amount is now due and owing, or, if not due, will become due on \_\_\_\_\_.
4. The claim (is) (is not) contingent. If contingent, the nature of the contingency 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 best of my knowledge and belief.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Claimant

A copy of this statement of claim has been served pursuant to Florida Probate Rule 5.490 to the attorney for the personal representative, designated personal representative, designated attorney of record or self-represented litigant, if a notice of designation has been filed with the Clerk. **The date and manner of service is documented in the case file docket on the entry for this claim.**