

**SUMNER COUNTY CHANCERY COURT
CLERK & MASTER'S OFFICE
155 EAST MAIN STREET, ROOM 3600
GALLATIN TN 37066
615-452-4282**

CLAIM FORM INSTRUCTIONS:

FILL OUT CLAIM FORM AND ATTACH CLAIM
DOCUMENTS

FILING FEE IS \$50.00 (NO PERSONAL CHECKS)

SIGN CLAIM FORM IN FRONT OF A NOTARY OR IN
FRONT OF THE COURT CLERK

PROVIDE 4 COPIES OF CLAIM FORM AND A SELF
ADDRESSED POSTAGE PAID ENVELOPE (ONE COPY
TO BE MAILED BACK TO YOU)

CLAIM AGAINST ESTATE OF

STATE OF TENNESSEE
 COUNTY OF SUMNER

 Deceased

 Creditor

 Docket No

 Address

 CITY

 STATE

 ZIP

Date	Items and Nature of Claim	Amount	Credits	Unpaid Balance

STATE OF TENNESSEE

I (or we) make oath that the above claim is a correct, and 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 therefor, in whole or part, except as is credited above, and no security has been received therefor, except as above stated.

This _____ day of _____, 20_____.

 Creditor's Signature

Filed in triplicate this _____ day of _____.

20_____.

 DEPUTY CLERK

Sworn to and subscribed before me this _____ day of _____

 20_____

 Notary Public

My commission expires _____

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 Clerk & Master's Office
 155 E. Main Street, Room 3600
 Gallatin, TN 37066 615-452-4282
 www.sumnerchancerycourt.com