STATE OF NEBRASKA CC 15:2 REV 04/2018 Neb. Rev. Stat. § 30-2486

IN THE MATTER OF THE ESTATE OF

Case No.

Deceased.

STATEMENT OF CLAIM Claim No.

TO THE CLERK OF THE COURT:

Claim of the undersigned is hereby made against this estate, itemized as follows:

| Description of Claim | Due Date, If Not Yet Due | Amount |
|----------------------|--------------------------|--------|
| | | |
| | | |
| | | |
| | | |

See attached bill or other documentation.

Total Claim:

This claim is:

Contingent

Unliquidated and the nature of the uncertainty is:

Secured, and a description of the security is:

Unsecured.

PRESENT THIS CLAIM TO THE COURT

Signature: Printed Name:

_____Date:_____

(Claimant or Authorized Party)

Street Address/P.O. Box:

City/State/ZIP Code:_____

Telephone Number:_____

Email address: ____

If completed by an attorney: Bar Number: