

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,
Decedent

**CLAIMANT'S PETITION FOR ALLOWANCE OF
CLAIM PREVIOUSLY DISALLOWED**

I, _____, Claimant, state:

1. My address is: _____.
2. I am an interested person as defined by Minnesota law because I have a claim against the Estate.
3. (Check the appropriate box)
☐ On _____, I delivered or mailed a written statement of claim to the Personal Representative. A copy of the claim is attached to this Petition.
☐ On _____, I filed a written statement of claim with the Court Administrator of this Court.
4. A notice of disallowance of the claim was mailed on _____, which is not more than 2 months prior to the date this Petition is filed.
5. The claim is proper and should be allowed because: _____

_____.

WHEREFORE, I request the Court:

1. Fix a time and place for a hearing on this Petition;
2. Enter an Order allowing the claim; and
3. Grant such other relief as may be proper.

Under penalties for perjury, I declare or affirm that I have read this document and I know or believe its representations are true and complete.

Dated: _____

Claimant

Attorney for Claimant

Name _____

Firm _____

Street _____

City, State, ZIP _____

Attorney License No: _____

Telephone: _____

FAX: _____

Email: _____

SAMPLE
DOCUMENT