

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,

Decedent

**PERSONAL REPRESENTATIVE'S PETITION
FOR LATE DISALLOWANCE OF CLAIM**

I, _____, Personal Representative of the Estate, state:

1. _____, Claimant, presented a written statement of claim on _____ in the amount of \$ _____. ("Claim"). The Claim has been filed with the Court or a copy of the Claim accompanies this Petition.
2. The claim should be disallowed because: _____

_____.
3. No notice of disallowance was mailed to claimant within two months after the time for original presentment of the Claim had expired.
4. Payment of the Claim has not been made.

WHEREFORE, I request the Court:

1. Fix a time and place for a hearing on this Petition;
2. Enter an Order formally disallowing 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: _____

Personal Representative

Attorney for Personal Representative

Name _____

Firm _____

Street _____

City, State, ZIP _____

Attorney License No: _____

Telephone: _____

FAX: _____
Email: _____

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DOCUMENT