

Name of Person Filing: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, and Zip Code: \_\_\_\_\_  
Daytime Phone Number: \_\_\_\_\_  
State Bar Number (if applicable): \_\_\_\_\_  
Represented by:  Self (no Attorney) or  Attorney

**SUPERIOR COURT OF ARIZONA  
MOHAVE COUNTY**

In the Matter of the Estate of \_\_\_\_\_

Case Number: \_\_\_\_\_

**CLAIM AGAINST THE ESTATE**

an Adult  a Minor, deceased

1. My name and address is \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. The Estate is indebted to me in the amount of \$\_\_\_\_\_

3. The basis of my claim is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(NOTE: Complete number 4 or 5 only if either apply to your claim.)**

4. The claim is not yet due. It will become due on (date) \_\_\_\_\_

5. The claim is secured by the following property (describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. I am mailing a copy of the Claim Against the Estate to the Personal Representative, if one has been appointed.

DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name