

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
PROBATE DIVISION

INT
IDD

In re:

An Adult

PETITION OF CLAIMANT FOR DETERMINATION OF CLAIM

1. A statement of claim was filed on _____ by the undersigned, who seeks payment of _____ for the following described claim: _____

2. Conservator has
 Allowed the claim but not paid it.
 Neither allowed nor denied the claim and sixty days have passed.
 Denied the claim.

3. Claimant seeks the following relief:
 An order allowing the claim, which must be paid no later that the next accounting.
 An order directing the conservator to pay the claim by a date certain.
 An order directing the conservator to perform specified acts listed below.
 An order directing the conservator to allow security from the estate.
 An order allowing an attachment or garnishment.
 Other (describe): _____

Signature of attorney

Signature

Typed name of attorney

Typed Name

Address (Actual address/not Post Office Box)

Address (Actual address/not Post Office Box)

Telephone number

Telephone number

Email address

Email address

Unified Bar number

Bar number (if filer is an attorney)

VERIFICATION

I, _____, being first duly sworn, on oath, depose and say that that I have read the foregoing pleading by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

Signature of claimant

Subscribed and sworn to before me this ____ day of _____, 20____.

Notary Public/Clerk

CERTIFICATE OF SERVICE

I certify that on the ____ day of _____, 20____, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

Signature

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ORDER REGARDING PETITION FOR DETERMINATION OF CLAIM

Upon consideration of the Petition of Claimant for Determination of Claim filed on _____, 20_____, by _____, it is hereby this _____ day of _____, 20_____,
ORDERED that _____

JUDGE

Copies to:
(Insert list of names and addresses of all interested persons. Attach additional sheet if necessary.)

CC: