

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
PROBATE DIVISION

_____ INT _____
_____ IDD _____

In re:

An Adult

STATEMENT OF CLAIM PURSUANT TO SUPERIOR COURT,
PROBATE DIVISION RULE 307

Claimant

Name: _____

Address: _____

Telephone: _____

Amount of claim: _____

(Attach supporting _____
documents.) _____

Email address: _____

Attorney for claimant (if any):

Name: _____

Address: _____

Telephone: _____

Email address: _____

VERIFICATION

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

Signature of Attorney (if any)

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