

STATE OF SOUTH CAROLINA)
)
COUNTY OF: _____)
)

IN THE PROBATE COURT

PETITION FOR ALLOWANCE OF CLAIM

CASE NUMBER: _____

Petitioner
vs.

Respondent(s) (if applicable)

The undersigned petitions the Court to allow the following claims against the estate in the amounts set forth below:

Creditor Name and Address

Amount of Claim

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

In support of this Petition, Petitioner states that each claim is valid, was presented within the period for the presentation of claims as provided by law, and has not been paid, and, as to those claims which were presented to the Personal Representative and not filed with the Court, that a copy of the statement of each such claim is attached to this Petition and made a part hereof.

(Other:)

Executed this _____ day of _____, 20_____.

Signature: _____

Name: _____

Address: _____

Email: _____

Telephone(O): _____

(H): _____

Attorney: _____

Address: _____

Email: _____

Telephone(O): _____

ORDER FOR ALLOWANCE OF CLAIM

On the basis of the within Petition and upon hearing for allowance of claims, IT IS HEREBY ORDERED that the following claims against the estate be ☐ ALLOWED ☐ DISALLOWED in the amounts set forth below:

Creditor Name and Address	Amount of Claim
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

Executed this _____ day of _____, 20_____.

_____, Probate Court Judge