

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Creditor Name, Address, Phone No.)

MONTANA ELEVENTH JUDICIAL DISTRICT COURT, FLATHEAD COUNTY

In the Matter of the Estate of

\_\_\_\_\_

Deceased.

§  
§  
§  
§  
§  
§

Cause No. \_\_\_\_\_

CREDITOR'S CLAIM

Creditor Name: \_\_\_\_\_

Basis of Claim: \_\_\_\_\_

(Supporting documentation attached)

Amount of Claim: \_\_\_\_\_

Date claim due: \_\_\_\_\_

Nature of uncertainty as to amount of claim and due date, if any: \_\_\_\_\_

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**CERTIFICATE OF SERVICE**

I hereby certify that a true copy of the foregoing document was served upon the person(s) or parties entitled hereto, on \_\_\_\_\_, 20\_\_ by the method(s) and at the address of:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

- US Mail (first class postage)
- Hand Delivery
- Facsimile
- Other: \_\_\_\_\_

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature