

UUPC Form 33 -- Claim against Estate  
(U.C.A. 75-3-804(1)(a))

\_\_\_\_\_  
Attorney's name and Utah Bar No.

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Telephone

IN THE \_\_\_\_\_ JUDICIAL DISTRICT COURT OF \_\_\_\_\_ COUNTY  
STATE OF UTAH

IN THE MATTER OF THE ESTATE OF )  
 ) CLAIM AGAINST ESTATE  
 )  
 )  
Deceased. ) Probate No. \_\_\_\_\_

Claim is hereby made against this estate by \_\_\_\_\_  
\_\_\_\_\_, as follows:

Basis of Claim Amount

(If claim is not yet due, state the date when it will become due. If the claim is contingent or unliquidated, state the nature of the uncertainty.)

\$

This claim is secured by: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Signature, typed or printed name, address, and telephone number of claimant

DATED: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Claimant

(Optional) CERTIFICATE OF MAILING OR DELIVERY

I hereby certify that I \_\_\_\_\_  
(mailed postage prepaid/hand delivered) a copy of the foregoing  
Claim against Estate to the following at the address indicated on  
the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_:

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

(Personal Representative/Attorney  
of record for Personal Representative)

\_\_\_\_\_  
Claimant

(Optional) RECEIPT

Received this claim on \_\_\_\_\_.

\_\_\_\_\_  
Personal Representative/Attorney  
for Personal Representative

INSTRUCTION TO CLAIMANT: This claim form must be filed with the Clerk of the Court or delivered or mailed to the Personal Representative or the Personal Representative's attorney of record. A Claimant may wish to use the Certificate of Mailing or Delivery, or have the Personal Representative or attorney acknowledge receipt either through a postal service mailing receipt or by use of the Receipt above, or file this Claim with the Clerk of the Court.

A Claimant may, but is not required to, annex copies of any documents supporting or affecting this claim.