

STATE OF SOUTH CAROLINA)
)
 COUNTY OF GREENVILLE)
)
 IN THE MATTER OF:)
)
 _____)
 (Decedent))

IN THE PROBATE COURT

NOTICE OF ALLOWANCE/DISALLOWANCE OF CLAIM

CASE NUMBER: _____

TO:	Creditor:	
	Address:	
	Telephone:	
	Email:	
	Original Creditor:	
	Address (if different from above)	
	Filed Date of Claim:	
	Claim Amount:	
	Account Number:	
	Other Reference Number:	

The undersigned, Personal Representative finds:

ALLOWED CLAIMS

Allowance of a claim is evidence the Personal Representative accepts the claim as a valid debt of the estate. However, an Allowance of a claim may not be construed to imply the estate will have sufficient assets with which to pay the claim.

- The claim is allowed and will be paid.
- The claim is allowed but cannot be paid due to (check all that apply):
 - No cash or liquid assets are available in the estate
 - No personal property is available in the estate
 - No real estate is available (house, land, etc.)
 - Real estate is in foreclosure
 - Other (explain): _____

DISALLOWED CLAIMS

A disallowed claim either in whole or in part will be barred to the extent disallowed unless the creditor commences a formal proceeding requiring a Summons, Petition and filing fee of \$150 for allowance of the claim in accordance with SCPC 62-3-804(2), within thirty (30) days after the mailing or other service of this Notice of Allowance/Disallowance of Claim. 62-3-806(a)

- The claim is disallowed in part. The amount of \$ _____ is disallowed; the balance of _____ is allowed. Explain: _____
- The claim is disallowed in full. Explain: _____

Executed this _____ day of _____, 20_____.

Personal Representative
 Signature: _____
 Print Name: _____
 Address: _____
 Telephone (Work): _____
 (Home): _____
 (Cell): _____
 Email: _____