

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ ADM \_\_\_\_\_

Estate of

\_\_\_\_\_  
Deceased

**PETITION FOR PAYMENT OF CLAIM PURSUANT TO D.C. CODE, SEC. 20-909(a)**  
(For estates of decedents dying on and after January 1, 1981 to June 30, 1995)

The undersigned claimant hereby petitions the Court for an order directing payment of a claim against the above-entitled estate.

1. Name of claimant: \_\_\_\_\_
2. Address of claimant: \_\_\_\_\_
3. Date of mailing or delivery of claim to Register of Wills or Personal Representative: \_\_\_\_\_  
\_\_\_\_\_
4. Amount of claim: \_\_\_\_\_
5. Basis of claim (check appropriate box):
  - Funeral expenses, not exceeding \$1,500.00.
  - Fiduciary and attorney's fees, not exceeding \$1,000.00.
  - Homestead allowance, not exceeding \$15,000.00.
  - Family allowance, not exceeding \$15,000.00.
  - Exempt property, not exceeding \$10,000.00.
  - Reasonable and necessary medical and hospital expenses of the last illness of the decedent, including compensation of persons attending the decedent.
  - Rent in arrears for which an attachment might be levied by law.
  - Judgments and decrees of courts in the District of Columbia.
  - Other just claims.
6. The petition is being filed because the claim or unbarred judgment has not been rejected but has not been paid within 8 months from the date of first publication of the Notice of Appointment, Notice to Creditors and Notice to Unknown Heirs.
7. The time for presentation of claims has expired.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone number

**VERIFICATION**

I do solemnly declare and affirm under penalty of law that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I have mailed copies of the foregoing petition, postage prepaid, by first class mail, to the following interested persons (list name and address of all interested persons):

_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

Estate of \_\_\_\_\_ ADM \_\_\_\_\_  
\_\_\_\_\_  
Deceased

**ORDER**

Upon consideration of the Petition for Payment of Claim Pursuant to D.C. Code, sec. 20-909(a), filed herein by \_\_\_\_\_, and any response thereto, it is hereby, by the Court, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

ORDERED

1. That the petition be  Granted  Denied
2. That \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
JUDGE

Cc: (list names and addresses of all interested persons, including yourself)