

STATE OF SOUTH CAROLINA  
COUNTY OF GREENVILLE

IN THE PROBATE COURT  
CASE NUMBER: \_\_\_\_\_

IN THE MATTER OF:  
\_\_\_\_\_,  
a protected person.

**STATEMENT OF CREDITOR'S CLAIM**

Conservator's Name: \_\_\_\_\_  
Date of appointment of Conservator (*if known*): \_\_\_\_\_  
Conservator's Mailing Address: \_\_\_\_\_

Creditor:	
Address:	
Telephone:	
Email:	
Original Creditor:	
Address ( <i>if different from above</i> ):	
Claim Amount Due:	\$
Account Number:	
Other Reference Number:	
Basis of claim (e.g., <i>contract, services rendered for protected person</i> ):	
Date claim will become due ( <i>if not already due</i> ):	
Nature of uncertainty as to the claim, if any (i.e., <i>contingent claim, amount of claim, due date</i> ):	
Description of security as to the claim, if any (i.e., <i>collateral for the debt</i> ):	

Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Preferred Telephone: \_\_\_\_\_  
Other Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

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

**INSTRUCTIONS:** The original claim **MUST** be delivered or mailed to the Conservator for the Protected Person and may also be filed with the Probate Court of the county in which the conservatorship is under administration (*see S.C. Code Ann. § 62-5-426*). Satisfaction or withdrawal of claim (Form #559GC) may be filed with the Court once the claim is resolved.