

IN THE _____ COURT FOR RUTHERFORD COUNTY, TENNESSEE
AT MURFREESBORO

_____,
PLAINTIFF,

VS.

CASE NO. _____

_____,
DEFENDANT.

STATEMENT IN COMPLIANCE WITH RULE 12.01

Comes, now _____, the (Plaintiff/Defendant), who would show to the Court as follows:

1. He/she is employed at _____

located at _____.

His/her weekly gross income is \$ _____ and his/her net income per week is \$ _____.

If wages are paid hourly, the hourly wage is \$ _____ per hour. Sources of additional income: _____.

1a. His/her spouse is employed at _____

located at _____.

The spouse has weekly gross income of \$ _____ and net income per week of \$ _____. If wages are paid hourly, the hourly wage is \$ _____ per hour.

Sources of additional income: _____.

2. He/she owns the following interests in real property:

<u>Interest</u>	<u>Acreage</u>	<u>Location</u>	<u>Improvements</u>	<u>Fair Market Value</u>	<u>Amount of Secured Debt</u>
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3. He/she owns the following interest in personal property:

a. Motor vehicles: Number owned _____

<u>Year</u>	<u>Make/Model</u>	<u>Market Value</u>	<u>Total of Liens</u>	<u>Lienholder</u>
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b. Household Furnishings:

<u>Fair Market Value</u>	<u>Lienholders</u>	<u>Balance Owed</u>	<u>Monthly Payments</u>
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c. Bank Accounts:

<u>Bank Account</u>	<u>Balance</u>	<u>Type of</u>

d. Stocks, Bonds & Other Intangibles:

<u>Shares</u>	<u>Company</u>	<u>Total Value</u>

e. Other property of significant value, e.g., riding mower, tools, equipment, insurance, boat, motorcycle, retirement plans:

<u>Item</u>	<u>Fair Market Value Payments</u>	<u>Lienholder</u>	<u>Balance</u>

4a. The spouse owes the following debts:

<u>Creditor</u>	<u>Balance Owed</u>	<u>Monthly Payments</u>	<u>Security</u>

5. He/she submits the following as an estimate of the necessary weekly or monthly expenses, as indicated, for support of him/herself (and children where applicable):

ITEM	MONTHLY EXPENSE
Rent/House Payment	\$
Utilities (gas, electricity, water)	\$
Telephone	\$
School Lunches (Child(ren))	\$
Work Lunches	\$
Automobile Payments	\$
Tranportation to & from work	\$
Clothing Replacement (self)	\$
Clothing Replacement (Child(ren))	\$
Laundry & Dry Cleaning	\$
Child Care While Working	\$
Haircuts and Beauty Shop	\$
Insurance	\$
Medical & Dental Expense	\$
Drug & Medicines	\$
Furniture Payments	\$
Cigarettes	\$
Groceries	\$
Miscellaneous Expenses	\$
TOTAL EXPENSES	\$

Under penalty of perjury, I make oath that the information set forth above is true and correct to the best of my knowledge.

This the _____ day of _____, _____.

Plaintiff/Defendant

STATE OF TENNESSEE

COUNTY OF _____

Subscribed and sworn before me on this the _____ day of _____,
_____.

NOTARY PUBLIC

My commission expires: _____

CERTIFICATE OF SERVICE

I hereby certify that a true and accurate copy of the foregoing has been furnished to _____, (attorney for the

Plaintiff/Defendant) by first class mail on this the _____ day of _____, _____.
