

**IN THE CHANCERY COURT FOR RUTHERFORD COUNTY, TENNESSEE**

**AT MURFREESBORO**

\_\_\_\_\_,  
**PETITIONER,**

**Address:** \_\_\_\_\_

vs.

**DOCKET NO.** \_\_\_\_\_

\_\_\_\_\_,  
**RESPONDENT.**

**Address:** \_\_\_\_\_

SSN: \_\_\_\_\_

**AFFIDAVIT FOR WAGE ASSIGNMENT  
(Petitioner)**

**I do hereby swear and affirm that the respondent has not made his/her child support payments in a timely manner and request that a wage assignment be issued to respondent's employer immediately.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC/ CLERK

**CERTIFICATE OF SERVICE**

I hereby certify that a true and exact copy of the foregoing Affidavit, was mailed by the U.S. Postal Service, postage prepaid by mail to the Defendant, \_\_\_\_\_ at \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Plaintiff

Date: \_\_\_\_\_

**PLEASE CHECK ONE\***

ORIGINAL ORDER \_\_\_\_\_  
MODIFIED ORDER \_\_\_\_\_  
UPDATED ORDER \_\_\_\_\_

**PLEASE CHECK ONE\***

STATE CASE REGISTRY \_\_\_\_\_  
WAGE ASSIGNMENT \_\_\_\_\_  
CENTRAL RECEIPTING \_\_\_\_\_

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COMPLETE AND FAX ONE COPY TO: LOCAL NASHVILLE AREA  
(615) 313-6634 OR STATEWIDE (888) 701-3073

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NON-IV-D DEMOGRAPHIC INFORMATION AND UPDATE WORKSHEET  
(Please Print Legibly)

DOCKET ID: \* \_\_\_\_\_

ORIGINAL ORDER DATE: \* \_\_\_\_\_

COURT CODE: \* \_\_\_\_\_

FAMILY VIOLENCE INDICATOR \* YES OR NO

CUSTODIAL PARENT INFORMATION:

CP LAST NAME: \* \_\_\_\_\_ FIRST NAME: \* \_\_\_\_\_ MIDDLE: \_\_\_\_\_

SEX: \_\_\_\_\_ CP SSN: \* \_\_\_\_\_ DATE OF BIRTH: \* \_\_\_\_\_

CP MAILING ADDRESS: \* \_\_\_\_\_

CITY NAME: \* \_\_\_\_\_ STATE: \* \_\_\_\_\_ ZIP: \* \_\_\_\_\_ COUNTRY: \_\_\_\_\_

NON-CUSTODIAL PARENT INFORMATION:

NCP LAST NAME: \* \_\_\_\_\_ FIRST NAME: \* \_\_\_\_\_ MIDDLE: \_\_\_\_\_

SEX: \_\_\_\_\_ NCP SSN: \* \_\_\_\_\_ DATE OF BIRTH: \* \_\_\_\_\_

NCP MAILING ADDRESS: \_\_\_\_\_

CITY NAME: \* \_\_\_\_\_ STATE: \* \_\_\_\_\_ ZIP: \* \_\_\_\_\_ COUNTRY: \_\_\_\_\_

NCP EMPLOYER: \* \_\_\_\_\_

EMPLOYER ADDRESS: \* \_\_\_\_\_

CITY NAME: \* \_\_\_\_\_ STATE: \* \_\_\_\_\_ ZIP: \* \_\_\_\_\_ COUNTRY: \_\_\_\_\_

DEPENDENT INFORMATION:

DP#1: LAST NAME: \* \_\_\_\_\_ FIRST NAME: \* \_\_\_\_\_ MIDDLE: \_\_\_\_\_

SEX: \_\_\_\_\_ SSN: \_\_\_\_\_ DATE OF BIRTH: \* \_\_\_\_\_

DP#2: LAST NAME: \* \_\_\_\_\_ FIRST NAME: \* \_\_\_\_\_ MIDDLE: \_\_\_\_\_

SEX: \_\_\_\_\_ SSN: \_\_\_\_\_ DATE OF BIRTH: \* \_\_\_\_\_

DP#3: LAST NAME: \* \_\_\_\_\_ FIRST NAME: \* \_\_\_\_\_ MIDDLE: \_\_\_\_\_

SEX: \_\_\_\_\_ SSN: \_\_\_\_\_ DATE OF BIRTH: \* \_\_\_\_\_

**\*FIELDS REQUIRED**

**NOTES:** ADDITIONAL DEPENDANTS CAN BE ENTERED ON A SEPARATE PAGE AND FAXED TO THE 800 NUMBER.  
DOCKET NUMBERS AND COURT CODE MUST BE RE-ENTERED FOR ADDITIONAL DEPENDANTS. FATHER'S AND MOTHER'S  
INFORMATION NEED NOT BE RE-ENTERED.

IN THE CHANCERY COURT FOR RUTHERFORD COUNTY, TENNESSEE  
AT MURFREESBORO

\_\_\_\_\_  
Petitioner,

v.

DOCKET NO. \_\_\_\_\_

\_\_\_\_\_  
Respondent.

SSN:

**ORDER FOR WAGE ASSIGNMENT**

It appearing to the court that a Wage Assignment Order should issue for the payment of child support in the above cause.

**IT IS ACCORDINGLY, ORDERED, ADJUDGED AND DECREED AS FOLLOWS:**

1. The court finds that a wage assignment shall issue to:

Name Of Company: \_\_\_\_\_.

Address: \_\_\_\_\_.

CITY, STATE, AND ZIP CODE: \_\_\_\_\_.

In the amount of \$\_\_\_\_\_ per \_\_\_\_\_ for current support and \$\_\_\_\_\_ per \_\_\_\_\_ for arrearages. Child support payments to be paid to the State Disbursement Unit, Post Office Box 305200, Nashville, Tn 37229. Said payment shall continue until further Order of this Court to the contrary.

2. The Defendant shall inform the Court of any changes in employment and of the names and addresses of any new employers.

3. The costs of this cause are taxed against

\_\_\_\_\_ .

Enter this the \_\_\_\_\_ day of \_\_\_\_\_ 2015.

\_\_\_\_\_  
JUDGE/CHANCELLOR

APPROVED FOR ENTRY:

\_\_\_\_\_  
PETITIONER

**CERTIFICATE OF SERVICE**

I hereby certify that a true and exact copy of the foregoing Order has been mailed postage prepaid in the United States Mail to the Defendant, at \_\_\_\_\_, \_\_\_\_\_ and the Plaintiff, at \_\_\_\_\_, \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_  
Deputy Clerk and Master