

IN THE CHANCERY COURT OF RUTHERFORD COUNTY, TENNESSEE
AT MURFREESBORO

IN THE MATTER OF:

Respondent,

Case No: _____

PROPERTY MANAGEMENT PLAN

- **REVISED (check if modifying a previously approved Property Management Plan)**

Pursuant to T.C.A. § 34-1-115, a Property Management Plan must be approved by the Court for investments over \$25,000.00. This plan must be amended and approved by the Court when changes are made. The Conservator/Guardian shall review the plan annually when accountings are due for filing and make the necessary changes on an Amended Property Management Plan to be submitted along with the annual accounting.

I, _____, the Conservator/Guardian of the Property for the Respondent, _____, submit the following Property Management Plan pursuant to T.C.A § 34-1-115:

1. Depository Accounts

PRIMARY CHECKING ACCOUNT (it is suggested that you operate from only 1 account):

(Bank) (Last 4 digits of account #)

List ALL depository accounts (money markets, savings, CD's, etc.):

2. Investment/Brokerage Accounts

List ALL brokerage or investment accounts (annuities, stocks, bonds, Retirement accounts, IRA's, etc.):

Any change from one type of investment to another investment type requires court approval, and an Amended Property Management Plan must be filed once any changes are allowed by the court.

3. Life Insurance Policies

List any life insurance policies for which the Respondent is the policy owner, the insured, and/or the beneficiary, along with the company name, benefit amount, policy type, policy number, and current cash surrender value:

4. Income and Expenses

List the current monthly income sources of the Respondent:

\$_____ from Social Security.

\$_____ from pension/retirement.

\$_____ from investment accounts.

\$_____ from rental properties.

\$ _____ from trust income.

\$ _____ (other not specified)

\$ _____ TOTAL INCOME

List the current monthly expenses of the Respondent:

\$ _____ for allowance (cash/personal spending).

\$ _____ for burial/pre-need policy.

\$ _____ for caregiver services/home health care.

\$ _____ for cable/internet/phone services.

\$ _____ for clothing needs.

\$ _____ for court approved Conservator fees.

\$ _____ gifts (birthday, holidays).

\$ _____ for court approved credit card payments.

\$ _____ for food/dining/groceries/toiletries.

\$ _____ for home maintenance/supplies.

\$ _____ for housing (mortgage/rent/care facility).

\$ _____ for insurance premiums (medical/life/property).

\$ _____ for loan payments owed by Respondent.

\$ _____ for medical expenses (co-pays, dental, physical therapy).

\$ _____ for pet/animal expenses.

\$ _____ for prescriptions and medical supplies.

\$ _____ for professional services (accountant, attorney). *All attorney fees must be approved by the Court.*

\$ _____ for taxes (property, income).

\$ _____ for transportation services.

\$ _____ for tuition/school supplies.

\$ _____ for utilities (electric/gas/water).

\$ _____ for vacation expenses.

\$ _____ for vehicles expenses (maintenance/gas/tags).

\$ _____ for vehicle insurance.

\$ _____ for vehicle payments.

\$ _____ (other not specified).

\$ _____ TOTAL EXPENSES

5. Real Property

List the addresses of all real property the Respondent may have an interest in and state how the property is currently held. State "None" if there is no real property:

If you plan to sell or encumber any of the Respondent's property during the period this Property Management Plan is in effect, you MUST first seek court approval to sell real property. An Amended Property Management Plan will

need to be filed after the sale takes place.

6. Personal Property

List the status of the Respondent's personal property listed in the Inventory:

List the model and location of any vehicles owned by the Respondent:

7. Trust information

Provide specific detail as to any trust befits the Respondent may be receiving or may be entitled to, including the name of the Trustee, the current value of the Trust assets, and the purpose of the trust, as a beneficiary or otherwise:

8. Burial and Pre-Need Plan:

Provide specific details as to any burial or pre-need funeral plan in which the Respondent has interest, including the company name and funeral home:

9. Revisions from Last Property Management Plan:

Detail any revisions/changes from the last Property Management Plan (i.e., opening/closing new accounts, increases/decreases in expenses, changes in investments, etc.):

I, _____, Conservator/Guardian for Respondent,
_____, solemnly swear and affirm that the statements provided herein are true and correct to the best of my knowledge and belief.

Respectfully submitted, this _____ day of _____, 20_____.

Conservator/Guardian

Sworn to and subscribed before me, this the _____ day of _____, 20_____.

Notary Public/Deputy Clerk

Commission Expires: _____