IN THE CHANCERY COURT FOR HENRY COUNTY, TENNESSEE

###### IN RE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CASE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MINOR / RESPONDENT

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fiduciary

##### PROPERTY MANAGEMENT PLAN

This plan must be amended when circumstances warrant. The Conservator 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 with the annual accounting.

I, *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*, the Conservator of the Property and Person for the Respondent, *\_\_\_\_\_\_\_\_\_\_\_\_\_*, submit the following Property Management Plan pursuant to Tennessee Code Annotated § 34-1-115:

1. *WARD’S NAME* is currently residing at *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*. It is anticipated that *WARD’S NAME* will have to remain in the long-term care facility at *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*. *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* charges approximately $\_\_\_\_\_\_\_\_\_\_ a day.

2. The inventory of the assets and income of *WARD’S NAME* are as follows:

ASSETS VALUE

(a)\_\_\_\_\_\_\_\_Bank checking account number\_\_\_\_\_\_

Balance on \_\_\_\_\_\_\_\_\_\_\_\_\_.....................................$\_\_\_\_\_\_\_\_\_

(It is suggested that you attempt to operate from only 1 account).

(b)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Investment Account Number \_\_\_\_\_\_\_\_\_\_

(contains IRA & Investment Account)

Balance on \_\_\_\_\_\_\_\_\_\_......................................$\_\_\_\_\_\_\_\_\_\_

(c) Real Estate at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

Murfreesboro, TN.............................................. $\_\_\_\_\_\_\_\_\_\_\_

(d) Continue Listing Ward’s Assets along with value, company name, and account number. Remember to include items such as vehicles, jewelry, other bank accounts, investment accounts, annuities, CD’s, Stocks and Bonds, Pre-Burial Plans, security deposits, household goods of value, safety deposit box contents, interests in businesses, Life Insurance policies etc.

All changes to the investment accounts require Court approval and an Amended Property Management Plan must be filed once a Court order is entered allowing changes.

INCOME:

Source Amount Frequency

(a)Social Security

Administration $\_\_\_\_\_\_\_\_ Monthly

(b)Thrift Savings Plan $\_\_\_\_\_\_\_\_ Monthly

(c)U. S. Treasury $\_\_\_\_\_\_\_\_ Monthly

(d)Fed Ex Corp. $\_\_\_\_\_\_\_\_ Monthly

(e)Rent from property at

\_\_\_\_\_\_\_\_\_\_\_\_ Dr. $\_\_\_\_\_\_\_\_\_ Monthly

(f)Promissory Note with

\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_ Monthly

(g) Continue listing other sources of income such as alimony, rental income, court settlements, etc.

Total Monthly Income: $\_\_\_\_\_\_\_

3. The residence at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is owned solely by ­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and is unencumbered.

4. EXPENSES:

To Amount Frequency

(a.) House Payment $\_\_\_\_\_\_\_ Monthly

(b.) Allowance (cash/personal) $\_\_\_\_\_\_ Monthly

(c.) Caregiver $\_\_\_\_\_\_\_ Weekly

(d.) Cable/internet/phone $\_\_\_\_\_\_\_ Monthly

(e.) Clothing $\_\_\_\_\_\_\_ Quarterly

(f.) Continue listing the Ward’s expenses with details of to whom paid, amount, and frequency. Remember to include items such as vehicle payments and insurance, burial policy payments, cell phone, membership dues, credit card or loan payments, food/groceries, entertainment, gifts (birthdays/holidays), insurance, known medical or prescription expenses, pet/animal expenses, professional services (accountant), taxes, tithes/donations, vacation expenses, etc.

5. Describe the status of the Ward’s Personal property in this section. Is it held by family members? Remains in real property while the Ward is residing in a nursing facility? Is all property at the nursing facility with the Ward? If Ward owns a vehicle, where is the vehicle currently located?

The sale or disposal of any personal property must be Court approved. Documentation regarding the sale and an amended Inventory and Property Management Plan must be filed reporting the changes.

6. If this is an Amended Property Management Plan, detail any revisions/changes made since the last Court approved Property Management Plan in this section. (Explanations of closing/opening of new accounts, increase or decrease in expenses or income, changes in investments, etc.)

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Conservator 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

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public/Deputy Clerk

Commission Expires:\_\_\_\_\_\_\_\_\_\_\_\_\_

This Property Management Plan is approved this the \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chancellor/Judge