

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

**STATEMENT OF FIDUCIARY AS TO PHYSICAL OR MENTAL CONDITION
OF PERSON WITH DISABILITY**

IN RE: CONSERVATORSHIP OF _____

NO. _____

Comes now, _____,
the duly appointed and qualified Conservator of _____,
and would respectfully show unto the Court the following:

That the ward, _____, continues to
need a Conservator due to: _____

(SPECIFY THE PHYSICAL OR MENTAL CONDITION OF THE PERSON WITH DISABILITY)

The ward is presently residing at the following address: (Please include name of facility if applicable)

This statement is furnished pursuant to T.C.A. §34-1-111(c)(2) to demonstrate to
the court the need, or lack of need, for the continuation of the fiduciary's services.

This ___ day of _____ 20____.

(Conservator)

Address: _____

