
Name *Street Address, City, State and Zip Code*

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PRINT NAME: _____ **SIGNATURE:** _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF
_____, 20_____.

DEPUTY CLERK – SESSIONS COURT

COURT DATE: _____ **at** _____ **am/pm.**

*** Court will be held at the Bradley County Juvenile Justice Center – 1620 Johnson Boulevard SE, Cleveland, TN 37311**

CERTIFICATE OF SERVICE

I hereby certify that I have this ____ day of _____ 20____, hand-delivered, e-mailed, faxed and/or deposited in the U. S. mail, with sufficient postage thereon, a copy of the foregoing addressed to:

Clerk