

# REQUEST FOR CERTIFICATE OF GOOD STANDING

Date: \_\_\_\_\_ Number of Certificates Requested: \_\_\_\_\_  
\_\_\_\_\_ [Insert Date] \_\_\_\_\_ [Insert No. Requesting]

Attorney: \_\_\_\_\_  
\_\_\_\_\_ [Insert Attorney's Name]

BPR#: \_\_\_\_\_  
\_\_\_\_\_ [Insert No.]

Date Introduced: \_\_\_\_\_ ( Not the date of license)  
\_\_\_\_\_ [Insert Date]

Place Introduced: Jackson: \_\_\_ Nashville: \_\_\_ Knoxville: \_\_\_ Other: \_\_\_\_\_  
\_\_\_\_\_ (Please specify)

Will Pick up: \_\_\_\_\_ [Check one]

**Or**

Mail Certificate: \_\_\_\_\_ Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_  
\_\_\_\_\_ [Insert requested information]

Person Requesting Certificate: \_\_\_\_\_  
\_\_\_\_\_ [If different than above]

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**\*Fee for a Certificate is \$50.00 each, payable in advance of issuing the certificate(s)\***

Return this form with your check made payable to:

**Appellate Court Clerk Office**  
Supreme Court Building  
401 7<sup>th</sup> Avenue North  
Nashville, TN 37219

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**\* IF - you want your certificate Federal Expressed back to you;  
You - must enclose a return Federal Express envelope\***

**Questions? - Call (615) 253-1470**