

**OFICINA DE COMPENSACIÓN A TRABAJADORES DE TENNESSEE
EN EL TRIBUNAL DE RECLAMACIONES DE COMPENSACIÓN A TRABAJADORES
EN**

*TENNESSEE BUREAU OF WORKERS’ COMPENSATION*

*IN THE COURT OF WORKERS’ COMPENSATION CLAIMS*

*AT \_\_\_\_\_\_\_*

|  |  |  |
| --- | --- | --- |
|  **,** | **)** | **Número de Expediente***Docket No.:* |
| **Empleado** *Employee,* | **)** |  |
| **v.** | **)** | **Número del archivo estatal***State File Number:* |
|  **,** | **)** |  |
| **Empleador** *Employer,* | **)** | **Juez***Judge* **[ ]** |
| **Y***And* | **)** |  |
|  **,** | **)** |  |
| **Compañía de Seguro** *Insurance Carrier.* | **)** |  |
|  | **)** |  |
|  |
| **DECLARACIÓN REGLA 72 JURADA***AFFIDAVIT* |

El declarante\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, comparece, declara y presta el siguiente testimonio:
*Comes the affiant, and deposes and testifies as follows:*

1. Tengo más de 18 años de edad y me encuentro en pleno uso de mis facultades mentales
*I am over eighteen years of age and of sound mind.*
2. Esta declaración regla 72 jurada se basa en mi propio conocimiento personal.
*This affidavit is based upon my own personal knowledge.*
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fin de la declaración
*This concludes my statement.*

Este día de \_\_\_\_\_ de 20.

 *This day of*

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

 Nombre
 *Name*

Estado de Tennessee )

 *State of Tennessee* )

Condado de )
*County of* )

 Personalmente compareció ante mí, el abajo firmante, notario público de y para el mencionado condado y estado, la parte antes nombrada, con quien personalmente estoy familiarizado, (o sobre la base de evidencia satisfactoria presentada ante mí), quien, tras ser debidamente juramentado, prestó juramento de haber sido quien firmara lo anterior para los fines expresos en este documento.
 *Personally appeared before me, the undersigned, a Notary Public, in and for said county and state, the within named party, with whom I am personally acquainted (or upon the basis of satisfactory evidence presented to me), who, after being duly sworn, made oath that he/she executed the foregoing for the purposes contained therein.*

EN FE DE LO CUAL plasmo mi firma y sello en este día \_de \_\_\_\_ de 20\_\_.

*WITNESS my hand and official seal this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_, 20\_\_.*

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

NOTARIO

 *NOTARY PUBLIC*

Mi comisión se vence
*My Commission Expires:*

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

**Si used no puede obtener la firma de un notario, usted puede firmar e incluir la fecha a lo siguiente:**

Yo declaro bajo pena de perjurio, que lo anterior es verdadero y correcto.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_         Firma \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre en letra de molde:

Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_