

(SAMPLE CITATION)

CITATION FOR
VIOLATION OF YOUTH ACCESS TO TOBACCO ACT
T.C.A. §39-17-1501 et. seq.

CITATION NUMBER _____ DATE OF ISSUANCE _____

STATE OF TENNESSEE – COUNTY OF _____

ATTENTION PARENTS: _____ You will receive notice from Juvenile Court when you and your child are to appear at court regarding this citation. OR, _____ You must call Juvenile Court after 48 hours after the issue date of this citation to find out when you and your child must go to court regarding this citation. The telephone number is _____.

I, the undersigned, have information that the following named juvenile did violate the Youth Access to Tobacco Act, T.C.A. §39-17-1501 et. seq. The details of such violation are set out in the Narrative section of this citation.

JUVENILE'S INFORMATION

1. Juvenile's Name (Last, First, Middle) _____
Father _____
2. Resides with: ___ Mother ___
___ Guardian ___ Legal Custodian
___ Other (specify) _____
3. Date of Birth: _____
Age: _____
Gender: ___ Male ___ Female
4. Race: ___ White ___ Black
___ American Indian/Alaskan
___ Other (specify) _____
5. Ethnicity: ___ Hispanic ___ Non-Hispanic
___ Unknown
6. Social Security No: _____
7. School: _____
8. Grade: _____

9. Mother/Guardian's Name (Last, First, Middle): _____	Address (Street, Apt. #, City): _____
State: _____ Zip Code: _____	Home Phone: _____
Work Phone: _____	Other Phone: _____

10. Father/Guardian's Name (Last, First, Middle): _____	Address (Street, Apt., City): _____
State: _____ Zip Code: _____	Home Phone: _____
Work Phone: _____	Other Phone: _____

11. Date of Violation: _____ 12. Location of Violation: _____

13. Was any tobacco product confiscated? ____yes ____no 14. If tobacco product was confiscated, where is it being kept? _____

15. Manner in which T.C.A. §39-17-1505(a) was violated (*check those applicable*):

- Possession of tobacco product
- Accepted or received a tobacco product
- Purchase of tobacco product
- Offered or presented false proof of age in order to purchase or receive tobacco

16. Narrative (*Provide a brief factual description of the violation*):

17. Officer/Principal (*print*) _____ Phone: _____

Address: _____

Officer/Principal Signature: _____

18. Juvenile's Responsibilities:

I hereby acknowledge receipt of this citation and agree to deliver it promptly to my parent(s) or guardian (s). The information I have given is true to the best of my knowledge. I understand that I may be prosecuted if I have given false information. I understand that my signature only indicates that I have received a copy of this citation, and is not an admission that I violated the *Youth Access to Tobacco Act*.

Juvenile's Signature: _____

COPY TO JUVENILE

