

PACKET #3

Forms Associated with Florida Supreme Court Forms for Filing a

Regular Dissolution of Marriage WITH Children



EIGHTH JUDICIAL CIRCUIT

Revised June 13, 2007

99 pages
\$14.85

CONTENTS

	Page
1. Warning to Self-Represented (Pro Se) Litigants	3
2. Resources for Litigants filing a Family Law Action without Legal Counsel	4
3. Family Court Case Management Program.....	5
Section “A” —Information and Required Filings.....	7
1. Notice of Limitation of Services Provided/Disclaimer.....	8
2. Checklist	9
3. Civil Cover Sheet.....	10
4. Affidavit of Corroborating Witness	11
5. Petition for Dissolution of Marriage with Dependent or Minor Children	13
6. Family Law Financial Affidavit (Short Form).....	22
7. Notice of Social Security Number	28
8. Affidavit of Children Born/Not Born During the Marriage.....	31
9. Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit	32
10. Child Support Guidelines Worksheet	37
11. Certificate of Compliance with Mandatory Disclosure	45
12. Notice of Related Cases	50
13. Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Children.....	52
14. Parenting Stabilization Course Information.....	64
Forms for the Respondent (the person responding to the petition for divorce).....	66
1. Answer and Waiver.....	67
2. Family Law Financial Affidavit (Short Form).....	68
3. Parenting Stabilization Course Information.....	74
Section “B” —Service through the Sheriff.....	76
1. Summons.....	80
2. Motion/Request to Enter Default/Default (Combined Form).....	86
Section C —Where Petitioner does not know Respondent’s location	88
1. Affidavit of Diligent Search and Inquiry	90
2. Military Service	92
Notice that Action is at Issue	98

WARNING

IF THERE IS ANY QUESTION in your mind concerning these forms, the use of these forms, or your legal rights, it is strongly recommended that you obtain the services of an attorney. If you do not know an attorney, you may contact the Florida Lawyer Referral Service at 1-800-342-8011. If you are filing for divorce in a case involving domestic violence and are financially unable to afford the services of an attorney, you may contact Three Rivers Legal Services at (352) 372-0519 or 1-800-372-0936 to see if you are eligible for their services.

DUE TO THE CHANGING NATURE OF THE LAW, the forms and information contained in this packet may become outdated. Therefore, you should review and research statutes and rules of procedure referenced in the instructions to ensure that the forms are accurate and current.

IN NO EVENT will the Florida Supreme Court, the Florida Bar, the Eighth Judicial Circuit Office of the Court Administrator, the Clerk of the Court or anyone contributing to the production of these forms, commentary, instructions, and appendices be liable for any indirect or consequential damages resulting from the use of the packet.

Use these forms at your own risk. These forms may or may not be appropriate in your particular case. Any desired outcome from the use of these forms cannot be predicted or guaranteed. **It is strongly recommended that you seek legal advice.**

When the forms refer to: “General Information for Self-Represented Litigants,” information is found at <http://www.flcourts.org> or the form is available in the Alachua County Law Library, Room 413, Alachua County Family/Civil Justice Center, 201 E. University Avenue, Gainesville, Florida 32601.



EIGHTH JUDICIAL CIRCUIT

Resources For Litigants Filing A Family Law Action Without Legal Counsel

Video- for people filing for divorce, there is a video, “How to File for Divorce in Florida without an Attorney,” that is available for viewing in the Law Library at the Courthouse during courthouse hours, 8:15 am. – 5:00 pm.

Internet Access- information on how to file family law cases without an attorney in the State of Florida can be found at:

<http://www.circuit8.org/prose/index.html> or <http://www.flcourts.org>
(choose Florida State Courts, select Self Help from the menu, then select Family Forms)

Internet access is available from the Law Library or the Alachua County Public Library.

Florida Supreme Court Website - additional forms may be found at:
<http://www.firn.edu/supct/osca/divisions/family/bin/index.html>

FAMILY COURT CASE MANAGEMENT PROGRAM EIGHTH JUDICIAL CIRCUIT



SERVING ALACHUA COUNTY
A PROGRAM OF THE ADMINISTRATIVE OFFICE OF THE COURT

The Family Court Case Management Program staff is employed by the Court to assist the Family Law Judges by making sure that all cases in which the petitioner is not represented by an attorney have met procedural requirements.

As in all matters involving law, it is recommended that you obtain the services of a competent lawyer. It is important for you to understand that the Court and Program staff do not represent you. **YOU** represent yourself.

If you decide to proceed without a lawyer, the Family Court Case Management Program the staff **will**:

- explain procedures
- conduct an instructional seminar to explain how to file forms
- inform you about additional court requirements
- help you set a hearing with the judge

The staff **will not**:

- give legal advice or explain rights
- represent you in court
- tell you what forms to file
- tell you how to present your case
- notify you that your case is ready to file

PROCEDURES

1. If you have decided to file a family law case without a lawyer, please follow these steps:
2. Purchase the applicable form &/or packet from the Clerk of the Courts or the Law Library.
3. If you wish to attend the instructional seminar, sign up for the seminar that is for the type of case you are filing. Sign up sheets are in room 400.
4. Complete the packet of forms - in ink or typed. Court staff cannot assist you in completing the forms.
5. Further instructions regarding filing and procedures are addressed in the packet. Procedural questions can be answered by calling Family Court. They are also addressed at the seminar.
6. Attend the seminar if you have signed up in room 400. Phone calls and seminars are your opportunity to have your procedural questions answered directly by the Family Court Case Management staff.
7. Instructions regarding procedures after filing are addressed in the packet. Your case will be monitored for procedural requirements by the Family Court Case Manager.

OTHER SERVICES

In addition to the instructional seminar, the Family Court Case Management Program offers assistance to self represented litigants in a variety of ways.

Internet Access- information on how to file family law cases without an attorney in the State of Florida can be found at:

<http://circuit8.org/prose/index.html> or
<http://FLcourts.org> (choose Florida State Courts then select self help center from the menu)

Internet access is available from the Law Library or the Alachua County Public Library.

Legal Clinic- cases that are complex or present unusual situations may be referred by the staff to the University of Florida School of Law. The clinic is seasonal and available at certain times of the school year. To be eligible, litigants must also meet certain financial requirements. For more information, call Family Court at 352/374-3694.

Florida Supreme Court Website - additional forms may be found at:
<http://www.firn.edu/supct/osca/divisions/family/bin/index.html>



DISSOLUTION OF MARRIAGE WITH CHILD(REN) PACKET INFORMATION

This packet is divided into three sections. Section “A” is used when the parties are in agreement with all issues. The petitioner will fill out and file section “A.” If you are serving your spouse through the Sheriff’s office you will need the forms in sections “A” and “B.” If you do not know the location of your spouse then you will need the forms in sections “A,” and “C” and the default forms in section “B.”

SECTION “A”

Section “A” includes forms for the petitioner and forms for the respondent:

PETITIONER’S FORMS

- Notice of Limited Service
- Civil Cover Sheet
- Affidavit of Corroborating Witness* (If no Florida driver license or Florida ID card.)
- Petition for Dissolution of Marriage With Dependent or Minor Child(ren)*
- Financial Affidavit*
- Notice of Social Security Number
- Affidavit of Children Born / Not Born During the Marriage*
- Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit*
- Notice of Filing the Child Support Guidelines Worksheet and the Guidelines Worksheet (this should be filed no later than 45 days after filing the initial petition)
- Certificate of Compliance with Mandatory Disclosure
- Notice of Related Cases
- Marital Settlement Agreement With Dependent or Minor Child(ren) (if an agreement is reached dividing property, debts and issues concerning the child(ren))*
- Proof of attendance of an approved “Parenting Stabilization Course” (certificate filed by provider)
- *These forms must be signed in the presence of a Notary Public

After you fill out the forms and have them notarized, make two copies, one for yourself and one for your spouse. File the originals with the Clerk’s office and provide a copy to your spouse. Include the filing fee and mail or deliver to the Clerk of Court, Alachua County Family/Civil Justice Center, 201 E. University Avenue, Gainesville, FL 32601, First Floor, (352) 374-3616.

If there are children or the parties cannot reach agreement on some issues, mediation will be required. Mediation can be ordered by the Court or the parties can make the arrangements themselves by contacting the program mediation office at (352) 491-4417.

Your spouse, known as the respondent, in turn will have to file the following forms:

RESPONDENT’S FORMS

- Answer and Waiver
- Financial Affidavit
- Proof of attendance of an approved “Parenting Stabilization Course” (certificate filed by provider)

AFTER PETITIONER’S AND RESPONDENT’S FORMS ARE FILED

Once both parties have filed their required forms you can proceed to schedule a hearing. To do so fill in the “Notice That Action is at Issue and Motion for Hearing / Non-Jury Trial” and follow the instructions provided. **Do not file the request for a hearing until all the above has been completed.** The forms in section “B” and “C” will not be needed at this point.



**EIGHTH JUDICIAL CIRCUIT
FAMILY COURT CASE MANAGEMENT PROGRAM**

NOTICE OF LIMITATION OF SERVICES PROVIDED/DISCLAIMER

The personnel in the office of the Clerk of the Court are not acting as your lawyer or providing legal advice to you.

Clerk of Court personnel are not acting on behalf of the court or any judge. The presiding judge in your case may require amendment of a form or substitution of a different form. The judge is not required to grant the relief requested in a form.

The personnel in the office of the Clerk of the Court cannot tell you what your legal rights or remedies are, represent you in court, give legal advice or instructions on completing forms or tell you how to testify in court.

In all cases, it is best to consult with your own attorney, especially if your case presents significant issues regarding children, child support, alimony, retirement or pension benefits, assets, or liabilities.

_____ I can read English. - (Go to signature line)

_____ I cannot read English, but this notice was read to me by

_____ in _____
(Name) (Language)

YOUR SIGNATURE

**DISSOLUTION OF MARRIAGE CHECKLIST WITHOUT CHILDREN
AND WITH CHILDREN***

- CIVIL COVER SHEET
- COPY OF DRIVERS LICENSE/FLORIDA I.D./OR AFFIDAVIT FROM A WITNESS
- NOTICE OF LIMITED SERVICE/DISCLAIMER
- PETITION
- FINANCIAL AFFIDAVIT (WIFE)
- FINANCIAL AFFIDAVIT (HUSBAND)
- FAMILY LAW AFFIDAVIT AND NOTICE OF SOCIAL SECURITY NUMBER
- AFFIDAVIT OF CHILDREN BORN/ NOT BORN
- ANSWER AND WAIVER

OR (IF NO RESPONSE)

- PROOF OF SERVICE (PERSONAL)
- AFFIDAVIT OF PERSONAL SERVICE OUT OF STATE
- PROOF OF SERVICE (CONSTRUCTIVE)
 - NOTICE OF ACTION
 - AFFIDAVIT OF DILIGENT SEARCH
 - PROOF OF PUBLICATION or
 - PROOF OF POSTING
- MOTION FOR DEFAULT

IF NEEDED

- SETTLEMENT AGREEMENT/ MEDIATION AGREEMENT (FOR MEDIATION CALL 352-491-4417)
- CERTIFICATE OF COMPLIANCE (WIFE)
- CERTIFICATE OF COMPLIANCE (HUSBAND)
- FOUR ENVELOPES

——**WITH CHILDREN: ALL OF THE ABOVE PLUS THE FOLLOWING**——

- UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT
- CERTIFICATE OF ATTENDANCE OF PARENTING STABILIZATION COURSE
 - WIFE
 - HUSBAND
- CERTIFICATE OF COMPLIANCE (WIFE)
- CERTIFICATE OF COMPLIANCE (HUSBAND)
- NOTICE OF FILING CHILD SUPPORT GUIDELINES WORKSHEET

* This checklist is not intended as legal advice, it is a list of what the court needs in order to go forward with your case. You must provide the information that is listed above before your court hearing.

FORM 1.997. CIVIL COVER SHEET

The civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law. This form is required for the use of the Clerk of Court for the purpose of reporting judicial workload data pursuant to Florida Statute 25.075. (See instructions on the next page.)

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

Case #: _____

Judge: _____

Plaintiff

vs.

Defendant

II. TYPE OF CASE (Place an x in one box only. If the case fits more than one type of case, select the most definitive.)

Domestic Relations	Torts	Other Civil
<input type="checkbox"/> Simplified dissolution <input checked="" type="checkbox"/> Dissolution <input type="checkbox"/> Support - IV-D <input type="checkbox"/> Support - Non IV-D <input type="checkbox"/> UIFSA - IV-D <input type="checkbox"/> UIFSA - Non IV-D <input type="checkbox"/> Domestic violence <input type="checkbox"/> Other domestic relations	<input type="checkbox"/> Professional malpractice <input type="checkbox"/> Products liability <input type="checkbox"/> Auto negligence <input type="checkbox"/> Other negligence	<input type="checkbox"/> Contracts <input type="checkbox"/> Condominium <input type="checkbox"/> Real property/ Mortgage foreclosure <input type="checkbox"/> Eminent domain <input type="checkbox"/> Challenge to proposed constitutional amendment <input type="checkbox"/> Other

III. IS JURY TRIAL DEMANDED IN COMPLAINT?

- Yes
- No

DATE _____

SIGNATURE OF ATTORNEY FOR PARTY
INITIATING ACTION _____

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.902(i),
AFFIDAVIT OF CORROBORATING WITNESS

When should this form be used?

This form may be used to prove residency in a **dissolution of marriage** proceeding. To get a divorce in Florida, either the husband or the wife must have lived in Florida for at least 6 months before filing the petition. Residency may be proved by a valid Florida driver's license, Florida identification card, or voter's registration card (issue date of document must be at least 6 months before the date the case is actually filed with the clerk of the circuit court), or the testimony or **affidavit** of someone other than you or your spouse. This form is used to prove residency by affidavit. The person signing this form must know that you have lived in the State of Florida for at least 6 months before the date you filed your **petition** for dissolution of marriage.

This form should be typed or printed in black ink, and signed in the presence of a **notary public** or **deputy clerk**. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where the petition was filed and keep a copy for you records.

What should I do next?

A copy of this form must be mailed or hand delivered to the other party in your case, if it is not **served** on him or her with your initial papers.

Where can I look for more information?

Before proceeding, you should read "General Information for Self-Represented Litigants" found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in "**bold underline**" in these instructions are defined there. For further information, see section 61.021, Florida Statutes or section 61.052(2), Florida Statutes.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT,
IN AND FOR ALACHUA COUNTY, FLORIDA

Case No.: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent.

AFFIDAVIT OF CORROBORATING WITNESS

I, {full legal name} _____, being sworn, certify that the following statements are true: I have known {name} _____ since {approximate date} _____; to the best of my understanding the petition in this action was filed on {date} _____; and I know of my own personal knowledge that this person has resided in the State of Florida for at least 6 months immediately before {date} _____.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Corroborating Witness

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

- _____ Personally known
- _____ Produced identification
- _____ Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:[fill in all blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} _____, helped {name} _____,
who is the affiant, fill out this form.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW
FORM 12.901(b)(1),
PETITION FOR DISSOLUTION OF MARRIAGE WITH DEPENDENT OR MINOR CHILD(REN)

When should this form be used?

This form should be used when a husband or wife is filing for a **dissolution of marriage** and you and your spouse have a dependent or minor child(ren) together or the wife is pregnant. You and/or your **spouse** must have lived in Florida for at least 6 months before filing for a dissolution in Florida. You must **file** this form if the following is true:

- ♦ You and your spouse have a dependent or minor child(ren) together or the wife is pregnant.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public or deputy clerk**. You should file the original with the **clerk of the circuit court** in the county where you live and keep a copy for your records.

What should I do next?

For your case to proceed, you must properly notify your spouse of the **petition**. If you know where he or she lives, you should use **personal service**. If you absolutely do not know where he or she lives, you may use **constructive service**. You may also be able to use constructive service if your spouse resides in another state or country. However, if constructive service is used, other than granting a divorce, the court may only grant limited relief. For more information on constructive service, see **Notice of Action for Dissolution of Marriage**, Florida Supreme Court Approved Family Law Form 12.913(a), and **Affidavit of Diligent Search and Inquiry**, Florida Family Law Rules of Procedure Form 12.913(b). If your spouse is in the military service of the United States, additional steps for service may be required. See, for example, **Memorandum for Certificate of Military Service**, Florida Supreme Court Approved Family Law Form 12.912(a). In sum, the law regarding constructive service and service on an individual in the military service is very complex and you may wish to consult an attorney regarding these issues.

If personal service is used, the **respondent** has 20 days to answer after being served with your petition. Your case will then generally proceed in one of the following three ways:

DEFAULT... If after 20 days, your spouse has not filed an **answer**, you may file a **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a), with the clerk of court. Then, if you have filed all of the required papers, you may call the clerk, **family law intake staff**, or **judicial assistant** to set a **final hearing**. You must notify your spouse of the hearing by using a **Notice of Hearing (General)**, Florida Supreme Court Approved Family Law Form 12.923, or other appropriate notice of hearing form.

UNCONTESTED... If your spouse files an answer that agrees with everything in your petition or an answer and waiver, **and** you have complied with **mandatory disclosure** and filed all of the required papers, you may call the clerk, family law intake staff, or judicial assistant to set a final hearing. You must notify your spouse of the hearing by using a **Notice of Hearing (General)**, Florida Supreme Court Approved Family Law Form 12.923, or other appropriate notice of hearing form.

CONTESTED... If your spouse files an answer or an answer and **counterpetition**, which disagrees with or denies anything in your petition, **and** you are unable to settle the disputed issues, you should file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, after you have complied with mandatory disclosure and filed all of the required papers. Some circuits may require the completion of **mediation** before a final hearing may be set. You should contact the clerk, family law intake staff, or judicial assistant for instructions on how to set your case for trial (final hearing). If your spouse files an

answer and counterpetition, you should answer the counterpetition within 20 days using an **Answer to Counterpetition**, Florida Supreme Court Approved Family Law Form 12.903(d).

Where can I look for more information?

Before proceeding, you should read “**General Information for Self-Represented Litigants**” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in “**bold underline**” in these instructions are defined there. For further information, see chapter 61, Florida Statutes.

Special notes...

If you do not have the money to pay the filing fee, you may obtain an Application for Determination of Civil Indigent Status from the clerk, fill it out, and the clerk will determine whether you are eligible to have filing fees deferred.

If this is a domestic violence case and you want to keep your address confidential for safety reasons, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Petitioner’s Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

With this form, you must also file the following:

- ♦ **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d).
- ♦ **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e), if you are asking that child support be ordered in the final judgment. (If you do not know your spouse’s income, you may file this worksheet after his or her financial affidavit has been served on you.)
- ♦ **Affidavit of Corroborating Witness**, Florida Supreme Court Approved Family Law Form 12.902(i) **OR** photocopy of current Florida driver’s license, Florida identification card, or voter’s registration card (issue date of copied document must be at least six months before date case is actually filed with the clerk of the circuit court).
- ♦ **Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.902(f)(1), if you and your spouse have reached an agreement on any or all of the issues.
- ♦ **Notice of Social Security Number**, Florida Supreme Court Approved Family Law Form 12.902(j).
- ♦ **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c). (This must be filed within 45 days of service of the petition on the respondent, if not filed at the time of the petition.)
- ♦ **Certificate of Compliance with Mandatory Disclosure**, Florida Family Law Rules of Procedure Form 12.932. (This must be filed within 45 days of **service** of the petition on the respondent, if not filed at the time of the petition, unless you and your spouse have agreed not to exchange these documents.)

Child Custody... If you and your spouse are unable to agree about with whom the child(ren) will live most of the time, a judge will decide for you. The judge will decide the parenting arrangements based on the child(ren)’s best interests. Regardless of whether there is an agreement, the court reserves jurisdiction to modify issues relating to the minor child(ren).

The judge may request a **parenting evaluation** or appoint a **guardian ad litem** in your case. This means that a neutral person will review your situation and report to the judge concerning parenting issues. The

purpose of such intervention is to be sure that the best interests of the child(ren) is (are) being served. For more information, you may consult section 61.13, Florida Statutes.

Some circuits may require the completion of a **parenting course** before a final hearing may be set. You should contact the clerk, family law intake staff, or judicial assistant about requirements for parenting courses where you live.

Listed below are some terms with which you should become familiar before completing your petition. **If you do not fully understand any of the terms below or their implications, you should speak with an attorney before going any further.**

- ♦ **Shared Parental Responsibility**
- ♦ **Sole Parental Responsibility**
- ♦ **Rotating Custody**
- ♦ **Primary Residential Responsibility**
- ♦ **Secondary Residential Responsibility**
- ♦ **Reasonable visitation**
- ♦ **Specified visitation**
- ♦ **Supervised visitation**
- ♦ **No contact**

Child Support... The court may order one parent to pay **child support** to assist the other parent in meeting the child(ren)'s material needs. **Both parents are required to provide financial support**, but one parent may be ordered to pay a portion of his or her support for the child(ren) to the other parent. If you are requesting custody or primary residential responsibility for the child(ren), you should request child support in your petition. Florida has adopted guidelines for determining the amount of child support to be paid. These guidelines are based on the combined income of **both** parents and take into account the financial contributions of both parents. You must file a **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c), and your spouse will be required to do the same. From your financial affidavits, you should be able to calculate the amount of child support that should be paid using the **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e). Because the child support guidelines take several factors into consideration, change over time, and vary from state to state, your child support obligation may be more or less than that of other people in seemingly similar situations.

Alimony... Alimony may be awarded to a spouse if the judge finds that he or she needs it and that the other spouse has the ability to pay it. **If you want alimony, you must request it in writing in the original petition or counterpetition. If you do not request alimony in writing before the final hearing, it is waived (you may not request it later).** You may request either **permanent alimony**, **lump sum alimony**, or **rehabilitative alimony**.

Marital/Nonmarital Assets and Liabilities... Florida law requires an **equitable distribution of marital assets and marital liabilities**. "Equitable" does not necessarily mean "equal." Many factors, including child support, custody, and alimony awards, may lead the court to make an unequal (but still equitable) distribution of assets and liabilities. **Nonmarital assets and nonmarital liabilities** are those assets and liabilities which the parties agree or the court determines belong to, or are the responsibility of, only one of the parties. If the parties agree or the court finds an asset or liability to be nonmarital, the judge will not consider it when distributing marital assets and liabilities.

Temporary Relief... If you need temporary relief regarding temporary use of assets, temporary responsibility for liabilities, parental responsibility and visitation with child(ren), temporary child support, or temporary alimony, you may file a **Motion for Temporary Support with Dependent or Minor**

Child(ren), Florida Supreme Court Approved Family Law Form 12.947(a). For more information, see the instructions for that form.

Marital Settlement Agreement... If you and your spouse are able to reach an agreement on any or all of the issues, you should file a **Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.902(f)(1). Both of you must sign this agreement before a **notary public** or **deputy clerk**. Any issues on which you are unable to agree will be considered **contested** and settled by the judge at the final hearing.

Final Judgment Form... These family law forms contain a **Final Judgment of Dissolution of Marriage with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.990(c)(1), which the judge may use if your case is contested. If you and your spouse reach an agreement on all of the issues, the judge may use a **Final Judgment of Dissolution of Marriage with Dependent or Minor Child(ren) (Uncontested)**, Florida Supreme Court Approved Family Law Form 12.990(b)(1). You should check with the clerk, family law intake staff, or judicial assistant to see if you need to bring a final judgment with you to the hearing. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

Nonlawyer... Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner,

and

Respondent.

**PETITION FOR DISSOLUTION OF MARRIAGE
WITH DEPENDENT OR MINOR CHILD(REN)**

I, *{full legal name}* _____, the
[**one** only] () Husband () Wife, being sworn, certify that the following statements are true:

1. JURISDICTION/RESIDENCE

() Husband () Wife () Both has (have) lived in Florida for at least 6 months before the filing of this Petition for Dissolution of Marriage.

2. The husband [**one** only] () is () is not a member of the military service.

The wife [**one** only] () is () is not a member of the military service.

3. MARRIAGE HISTORY

Date of marriage: *{month, day, year}* _____

Place of marriage: *{city, state, country}* _____

Date of separation: *{month, day, year}* _____ (**if approximate**)

4. DEPENDENT OR MINOR CHILD(REN)

[**all** that apply]

____ a. The wife is pregnant. Baby is due on: *{date}* _____

____ b. The minor (under 18) child(ren) common to both parties are:

Name	Place of Birth	Birth date	Sex
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

____ c. The minor child(ren) born or conceived during the marriage who are **not** common to both parties are:

Name	Place of Birth	Birth date	Sex
_____	_____	_____	_____
_____	_____	_____	_____

The birth father(s) of the above minor child(ren) is (are) *{name and address}* _____

___ d. The child(ren) common to both parties who are 18 or older but who are dependent upon the parties due to a mental or physical disability are:

Name	Place of Birth	Birth date	Sex
_____	_____	_____	_____
_____	_____	_____	_____

5. A completed Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit, Florida Supreme Court Approved Family Law Form 12.902(d), is filed with this petition. (You **must** complete and attach this form in a dissolution of marriage with minor child(ren)).

6. A completed Notice of Social Security Number, Florida Supreme Court Approved Family Law Form 12.902(j), is filed with this petition.

7. This petition for dissolution of marriage should be granted because:

[**one** only]

- ___ a. The marriage is irretrievably broken.
- ___ b. One of the parties has been adjudged mentally incapacitated for a period of 3 years prior to the filing of this petition. A copy of the Judgment of Incapacity is attached.

SECTION I. MARITAL ASSETS AND LIABILITIES

[**one** only]

___ 1. There are no marital assets or liabilities.

___ 2. There are marital assets or liabilities. All marital and nonmarital assets and liabilities are (or will be) listed in the financial affidavits, Florida Family Law Rules of Procedure Form 12.902(b) or (c), to be filed in this case.

[**all** that apply]

- ___ a. All marital assets and liabilities have been divided by a written agreement between the parties, which is attached, to be incorporated into the final judgment of dissolution of marriage. (The parties may use Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Child(ren), Florida Supreme Court Approved Family Law Form 12.902(f)(1).
- ___ b. The Court should determine how the assets and liabilities of this marriage are to be distributed, under section 61.075, Florida Statutes.
- ___ c. Petitioner should be awarded an interest in Respondent's property because:

SECTION II. SPOUSAL SUPPORT (ALIMONY)

[**one** only]

___ 1. **Petitioner forever gives up his/her right to spousal support (alimony) from Respondent.**

___ 2. Petitioner requests that the Court order Respondent to pay the following spousal support (alimony) and claims that he or she has a need for the support that he or she is requesting **and Respondent has the ability to pay that support**. Spousal support (alimony) is requested in the amount of \$_____ every () week () other week () month, beginning {date} _____ and continuing until {date or event} _____.

Explain why the Court should order Respondent to pay and any specific request(s) for type of alimony (temporary, permanent, rehabilitative, and/or lump sum): _____

[✓ if applies] () Petitioner requests life insurance on Respondent’s life, provided by Respondent, to secure such support.

SECTION III. CHILD CUSTODY, PARENTAL RESPONSIBILITY, AND VISITATION

1. The minor child(ren) currently reside(s) with () Mother () Father () Other: {explain} _____

2. **Parental Responsibility.** It is in the child(ren)’s best interests that parental responsibility be:
[✓ one only]

- _____ a. shared by both Father and Mother.
- _____ b. awarded solely to () Father () Mother. Shared parental responsibility would be detrimental to the child(ren) because: _____

3. **Primary Residential Parent (Custody).** It is in the best interests of the child(ren) that the primary residential parent be () Father () Mother () undesignated () rotating because: ____

4. **Visitation or Time Sharing.** Petitioner requests that the court order
[✓ all that apply]

- _____ a. no visitation.
- _____ b. limited visitation.
- _____ c. supervised visitation.
- _____ d. supervised or third-person exchange of child(ren).
- _____ e. visitation or time sharing as determined by the Court.
- _____ f. a visitation or time sharing schedule as follows:
Explain the requested visitation or time sharing schedule: _____

Explain why this request is in the best interests of the child(ren): _____

Has the above visitation or time sharing schedule been agreed to by the parties? () yes () no

SECTION IV. CHILD SUPPORT

[✓ all that apply]

____ 1. Petitioner requests that the Court award child support as determined by Florida’s child support guidelines, section 61.30, Florida Statutes. A completed Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), is, or will be filed. Such support should be ordered retroactive to:

- ____ a. the date of separation {date} _____.
- ____ b. the date of the filing of this petition.
- ____ c. other {date}_____ {explain} _____

____ 2. Petitioner requests that the Court award child support to be paid beyond the age of 18 years because:

____ a. the following child(ren) {name(s)} _____ is (are) dependent because of a mental or physical incapacity which began before the age of 18. {explain} _____

____ b. the following child(ren) {name(s)} _____ is (are) dependent in fact and is (are) in high school while he/she (they) are between the ages of 18 and 19; said child(ren) is (are) performing in good faith with reasonable expectation of graduation before the age of 19.

____ 3. Petitioner requests that the Court award a child support amount that is more than or less than Florida’s child support guidelines. Petitioner understands that Motion to Deviate from Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943, **must** be filed before the court will consider this request.

____ 4. Petitioner requests that medical/dental insurance coverage for the minor child(ren) be provided by:

[✓ **one** only]

- ____ a. Father.
- ____ b. Mother.

____ 5. Petitioner requests that uninsured medical/dental expenses for the child(ren) be paid:

[✓ **one** only]

- ____ a. by Father.
- ____ b. by Mother.
- ____ c. by Father and Mother [each pay one-half].
- ____ d. according to the percentages in the Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e).
- ____ e. Other {explain}: _____

____ 6. Petitioner requests that life insurance to secure child support be provided by:

- ____ a. Father.
- ____ b. Mother.
- ____ c. Both.

SECTION V. OTHER

1. [If Petitioner is also the Wife, ✓ **one** only] () yes () no Petitioner/Wife wants to be known by her former name, which was {full legal name} _____.

2. Other relief {specify}: _____

SECTION VI. PETITIONER'S REQUEST (This section summarizes what you are asking the Court to include in the final judgment of dissolution of marriage.)

Petitioner requests that the Court enter an order dissolving the marriage **and**:

[**all** that apply]

- 1. distributing marital assets and liabilities as requested in Section I of this petition;
- 2. awarding spousal support (alimony) as requested in Section II of this petition;
- 3. establishing the primary residential parent (custody), parental responsibility, and visitation for the dependent or minor child(ren) common to both parties, as requested in Section III of this petition;
- 4. establishing child support for the dependent or minor child(ren) common to both parties, as requested in Section IV of this petition;
- 5. restoring Wife's former name as requested in Section V of this petition;
- 6. awarding other relief as requested in Section V of this petition; and any other terms the Court deems necessary.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this petition and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

 Signature of Petitioner
 Printed Name: _____
 Address: _____
 City, State, Zip: _____
 Telephone Number: _____
 Fax Number: _____

STATE OF FLORIDA
 COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

 NOTARY PUBLIC or DEPUTY CLERK

 [Print, type, or stamp commissioned name of notary or deputy clerk.]

Personally known
 Produced identification
 Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]
 I, *{full legal name and trade name of nonlawyer}* _____,
 a nonlawyer, located at *{street}* _____, *{city}* _____,
{state} _____, *{phone}* _____, helped *{name}* _____,
 who is the petitioner, fill out this form.

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(b),
FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM)

When should this form be used?

This form should be used when you are involved in a family law case which requires a **financial affidavit** and your individual gross income is **UNDER \$50,000 per year**.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public** or **deputy clerk**. You should **file** the original with the **clerk of the circuit court** in the county where the **petition** was filed and keep a copy for your records.

What should I do next?

A copy of this form must be mailed or hand delivered to the other **party** in your case, if it is not served on him or her with your initial papers. This must be accomplished within 45 days of service of the petition.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in **“bold underline”** in these instructions are defined there. For further information, see rule 12.285, Florida Family Law Rules of Procedure.

Special notes...

If this is a domestic violence case and you want to keep your address confidential for safety reasons, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Petitioner’s Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

The affidavit must be completed using **monthly** income and expense amounts. If you are paid or your bills are due on a schedule which is not monthly, you must convert those amounts. Hints are provided below for making these conversions.

Hourly - If you are paid by the hour, you may convert your income to monthly as follows:				
Hourly amount	x	Hours worked per week	=	Weekly amount
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Daily - If you are paid by the day, you may convert your income to monthly as follows:				
Daily amount	x	Days worked per week	=	Weekly amount
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Weekly - If you are paid by the week, you may convert your income to monthly as follows:				
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Bi-weekly - If you are paid every two weeks, you may convert your income to monthly as follows:				
Bi-weekly amount	x	26	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Semi-monthly - If you are paid twice per month, you may convert your income to monthly as follows:				
Semi-monthly amount	x	2	=	Monthly Amount

Expenses may be converted in the same manner.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

PRESENT MONTHLY DEDUCTIONS:

- 18. Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities)
 - a. Filing Status _____
 - b. Number of dependents claimed _____
- 19. Monthly FICA or self-employment taxes
- 20. Monthly Medicare payments
- 21. Monthly mandatory union dues
- 22. Monthly mandatory retirement payments
- 23. Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship
- 24. Monthly court-ordered child support actually paid for children from another relationship
- 25. Monthly court-ordered alimony actually paid
 - 25a. from this case: \$ _____
 - 25b. from other case(s): _____

18. \$ _____
 19. _____
 20. _____
 21. _____
 22. _____
 23. _____
 24. _____
 25. _____

26. TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES (Add lines 18 through 25) **TOTAL: 26. \$** _____

PRESENT NET MONTHLY INCOME (Subtract line 26 from line 17) **27. \$** _____

SECTION II. AVERAGE MONTHLY EXPENSES

A. HOUSEHOLD:

- Mortgage or rent \$ _____
- Property taxes \$ _____
- Utilities \$ _____
- Telephone \$ _____
- Food \$ _____
- Meals outside home \$ _____
- Maintenance/Repairs \$ _____
- Other: _____ \$ _____

E. OTHER EXPENSES NOT LISTED ABOVE

- Clothing \$ _____
- Medical/Dental (uninsured) \$ _____
- Grooming \$ _____
- Entertainment \$ _____
- Gifts \$ _____
- Religious organizations \$ _____
- Miscellaneous \$ _____
- Other: _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

B. AUTOMOBILE

- Gasoline \$ _____
- Repairs \$ _____
- Insurance \$ _____

C. CHILD(REN)'S EXPENSES

- Day care \$ _____
- Lunch money \$ _____
- Clothing \$ _____
- Grooming \$ _____
- Gifts for holidays \$ _____
- Medical/Dental (uninsured) \$ _____
- Other: _____ \$ _____

F. PAYMENTS TO CREDITORS

CREDITOR:	MONTHLY PAYMENT
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

D. INSURANCE

- Medical/Dental \$ _____
- Child/ren's medical/dental \$ _____
- Life \$ _____
- Other: _____ \$ _____

28. TOTAL MONTHLY EXPENSES (add ALL monthly amounts in A through F above) **28. \$** _____

SUMMARY

29. TOTAL PRESENT MONTHLY NET INCOME

(from line 27 of SECTION I. INCOME)

29. \$ _____

30. TOTAL MONTHLY EXPENSES (from line 28 above)

30. \$ _____

31. SURPLUS (If line 29 is more than line 30, subtract line 30 from line 29.

This is the amount of your surplus. Enter that amount here.)

31. \$ _____

32. (DEFICIT) (If line 30 is more than line 29, subtract line 29 from line 30.

This is the amount of your deficit. Enter that amount here.)

32. (\$ _____)

SECTION III. ASSETS AND LIABILITIES

Use the nonmarital column only if this is a petition for dissolution of marriage and you believe an item is “nonmarital,” meaning it belongs to only one of you and should not be divided. You should indicate to whom you believe the item(s) or debt belongs. (Typically, you will only use this column if property/debt was owned/owed by one spouse before the marriage. See the “General Information for Self-Represented Litigants” at section 61.075(1), Florida Statutes, for definitions of “marital” and “nonmarital” assets and liabilities.)

A. ASSETS:

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). DO NOT LIST ACCOUNT NUMBERS. ✓ the box next to any asset(s) which you are requesting the judge award to you.	Current Fair Market Value	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/> Cash (on hand)	\$ _____		
<input type="checkbox"/> Cash (in banks or credit unions)			
<input type="checkbox"/> Stocks, Bonds, Notes			
<input type="checkbox"/> Real estate: (Home)			
<input type="checkbox"/> (Other)			
<input type="checkbox"/> Automobiles			
<input type="checkbox"/> Other personal property			
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> ✓ here if additional pages are attached.			
Total Assets (add next column)	\$ _____		

B. LIABILITIES:

DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). DO NOT LIST ACCOUNT NUMBERS. ✓ the box next to any debt(s) for which you believe you should be responsible.	Current Amount Owed	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/> Mortgages on real estate: First mortgage on home	\$		
<input type="checkbox"/> Second mortgage on home			
<input type="checkbox"/> Other mortgages			
<input type="checkbox"/>			
<input type="checkbox"/> Auto loans			
<input type="checkbox"/>			
<input type="checkbox"/> Charge/credit card accounts			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> ✓ here if additional pages are attached.			
Total Debts (add next column)	\$		

C. CONTINGENT ASSETS AND LIABILITIES:

INSTRUCTIONS: If you have any **POSSIBLE assets** (income potential, accrued vacation or sick leave, bonus, inheritance, etc.) or **POSSIBLE liabilities** (possible lawsuits, future unpaid taxes, contingent tax liabilities, debts assumed by another), you must list them here.

Contingent Assets ✓ the box next to any contingent asset(s) which you are requesting the judge award to you.	Possible Value	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/>	\$		
<input type="checkbox"/>			
Total Contingent Assets	\$		

Contingent Liabilities ✓ the box next to any contingent debt(s) for which you believe you should be responsible.	Possible Amount Owed	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/>	\$		
<input type="checkbox"/>			
Total Contingent Liabilities	\$		

SECTION IV. CHILD SUPPORT GUIDELINES WORKSHEET

(Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet, MUST be filed with the court at or prior to a hearing to establish or modify child support. This requirement cannot be waived by the parties.)

[**one** only]

___ **A Child Support Guidelines Worksheet IS or WILL BE filed in this case.** This case involves the establishment or modification of child support.

___ **A Child Support Guidelines Worksheet IS NOT being filed in this case.** The establishment or modification of child support is not an issue in this case.

I certify that a copy of this document was [**one** only] () mailed () faxed and mailed () hand delivered to the person(s) listed below on {date} _____.

Other party or his/her attorney:

Name: _____
Address: _____
City, State, Zip: _____
Fax Number: _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Party
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or deputy clerk.]

___ Personally known
___ Produced identification
___ Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} ____, helped {name} _____
who is the [**one** only] ___ petitioner **or** ___ respondent, fill out this form.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.902(j),
NOTICE OF SOCIAL SECURITY NUMBER

When should this form be used?

This form must be completed and filed by each party in all **paternity**, **child support**, and **dissolution of marriage** cases, regardless of whether the case involves a minor child(ren) and/or property.

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where your case was filed and keep a copy for your records.


What should I do next?


A copy of this form must be mailed or hand delivered to the other party in your case, if it is not **served** on him or her with your initial papers.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in “**bold underline**” in these instructions are defined there. For further information, see sections 61.052 and 61.13, Florida Statutes.

Special notes...

If this is a domestic violence case and you want to keep your address confidential for safety reasons, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Petitioner’s Request for Confidential Filing of Address**,  Florida Supreme Court Approved Family Law Form 12.980(i).

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT,
IN AND FOR ALACHUA COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,

and

Respondent.

NOTICE OF SOCIAL SECURITY NUMBER

I, *{full legal name}*, _____
certify that my social security number is _____, as required in section
61.052(7), sections 61.13(9) or (10), section 742.031(3), sections 742.032(1)-(3), and/or sections
742.10(1)-(2), Florida Statutes. My date of birth is _____.

[**one** only]

- _____ 1. This notice is being filed in a dissolution of marriage case in which the parties have **no** minor children in common.
- _____ 2. This notice is being filed in a paternity or child support case, or in a dissolution of marriage in which the parties have minor children in common. The minor child(ren)'s name(s), date(s) of birth, and social security number(s) is/are:

Name	Birth date	Social Security Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

{Attach additional pages if necessary.}

Disclosure of social security numbers shall be limited to the purpose of administration of the Title IV-D program for child support enforcement.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this notice and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk]

____ Personally known
____ Produced identification
Type of identification produced _____.

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [~~do not~~ fill in **all** blanks]

I, *{full legal name and trade name of nonlawyer}* _____,
a nonlawyer, located at *{street}* _____, *{city}* _____,
{state} _____, *{phone}* _____, helped *{name}* _____,
who is the [**one** only] ___ petitioner **or** ___ respondent, fill out this form.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

Petitioner,

CASE NO.: _____

DIVISION: _____

vs.

Respondent.

AFFIDAVIT OF CHILDREN BORN/NOT BORN DURING THE MARRIAGE

I, _____ certify that the following statements are true (**check all that apply**):

____ a. No children were born during the marriage.

____ b. The following children are of Husband and Wife:

Name: _____	d.o.b.: ____/____/____
Name: _____	d.o.b.: ____/____/____
Name: _____	d.o.b.: ____/____/____
Name: _____	d.o.b.: ____/____/____
Name: _____	d.o.b.: ____/____/____

____ c. The following children were born to the Wife during the marriage but are **not** the biological children of the Husband:

Name: _____	d.o.b.: ____/____/____
Name: _____	d.o.b.: ____/____/____

____ d. There is/are an ongoing case(s) involving the children listed in paragraph b or c:

_____ County Case No. _____
_____ County Case No. _____

Note: A Uniform Child Custody Jurisdiction Act (UCCJA) Affidavit must be filed as to each child to which a custody determination must be made.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that punishment for knowingly making a false statement includes fines and/or imprisonment.

Date: _____

Signature of Party
Printed Name: _____
Address: _____
City, State, Zip _____
Telephone: _____

STATE OF FLORIDA COUNTY OF _____ Sworn to or affirmed and signed before me
on _____ by _____ Type of identification: _____

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or deputy clerk]

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.902(d),
UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA) AFFIDAVIT

When should this form be used?

This form should be used in any case involving custody of or visitation with any minor child(ren). This **affidavit is required** even if the custody and visitation of the minor child(ren) are not in dispute.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public** or **deputy clerk**. You should then **file** the original with the **clerk of the circuit court** in the county where the petition was filed and keep a copy for your records.


What should I do next?


A copy of this form must be mailed or hand delivered to the other party in your case, if it is not served on him or her with your initial papers.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at the <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in **“bold underline”** in these instructions are defined there. For further information, see sections 61.501-61.542, Florida Statutes.

Special notes...

If you are the petitioner in an injunction for protection against domestic violence case and you have filed **Petitioner’s Request for Confidential Filing of Address**,  Florida Supreme Court Approved Family Law Form 12.980(i), you should write “confidential” in any space on this form that would require you to write the address where you are currently living.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
 IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
 Division: _____

 Petitioner,

and

 Respondent.

**UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)
 AFFIDAVIT**

I, {full legal name} _____, being sworn, certify that the following statements are true:

1. The number of minor child(ren) subject to this proceeding is _____. The name, place of birth, birth date, and sex of each child; the present address, periods of residence, and places where each child has lived **within the past five (5) years**; and the name, present address, and relationship to the child of each person with whom the child has lived during that time are:

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # 1 :

Child's Full Legal Name: _____
 Place of Birth: _____ Date of Birth: _____ Sex: __

Child's Residence for the past 5 years:

Dates (From/To)	Address (including city and state) where child lived	Name and present address of person child lived with	Relationship to child
_____/present*			
_____/_____			
_____/_____			
_____/_____			
_____/_____			
_____/_____			

* If you are the petitioner in an injunction for protection against domestic violence case and you have filed Petitioner's Request for Confidential Filing of Address, Florida Supreme Court Approved Family Law Form 12.980(i), you should write "confidential" in any space on this form that would require you to enter the address where you are currently living.

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # ____:

Child's Full Legal Name: _____
 Place of Birth: _____ Date of Birth: _____ Sex: __

Child's Residence for the past 5 years:

Dates (From/To)	Address (including city and state) where child lived	Name and present address of person child lived with	Relationship to child
_____/present			
_____/____			
_____/____			
_____/____			
_____/____			
_____/____			

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # ____:

Child's Full Legal Name: _____
 Place of Birth: _____ Date of Birth: _____ Sex: __

Child's Residence for the past 5 years:

Dates (From/To)	Address (including city and state) where child lived	Name and present address of person child lived with	Relationship to child
_____/present			
_____/____			
_____/____			
_____/____			
_____/____			
_____/____			

2. **Participation in custody proceeding(s):**

[**one** only]

I HAVE NOT participated as a party, witness, or in any capacity in any other litigation or custody proceeding in this or any other state, concerning custody of a child subject to this proceeding.

I HAVE participated as a party, witness, or in any capacity in any other litigation or custody proceeding in this or another state, concerning custody of a child subject to this proceeding.

Explain:

a. Name of each child: _____

b. Type of proceeding: _____

c. Court and state: _____

d. Date of court order or judgment (if any): _____

3. **Information about custody proceeding(s):**

[**one** only]

I HAVE NO INFORMATION of any custody proceeding pending in a court of this or any other state concerning a child subject to this proceeding.

I HAVE THE FOLLOWING INFORMATION concerning a custody proceeding pending in a court of this or another state concerning a child subject to this proceeding, other than set out in item 2. Explain:

a. Name of each child: _____

b. Type of proceeding: _____

c. Court and state: _____

d. Date of court order or judgment (if any): _____

4. **Persons not a party to this proceeding:**

[**one** only]

I DO NOT KNOW OF ANY PERSON not a party to this proceeding who has physical custody or claims to have custody or visitation rights with respect to any child subject to this proceeding.

I KNOW THAT THE FOLLOWING NAMED PERSON(S) not a party to this proceeding has (have) physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this proceeding:

a. Name and address of person: _____

() has physical custody () claims custody rights () claims visitation rights.

Name of each child: _____

b. Name and address of person: _____

() has physical custody () claims custody rights () claims visitation rights.

Name of each child: _____

c. Name and address of person: _____

() has physical custody () claims custody rights () claims visitation rights.

Name of each child: _____

5. **Knowledge of prior child support proceedings:**

[**one** only]

The child(ren) described in this affidavit are NOT subject to existing child support order(s) in this or any state or territory.

The child(ren) described in this affidavit are subject to the following existing child support order(s):

- a. Name of each child: _____
- b. Type of proceeding: _____
- c. Court and address: _____
- d. Date of court order/judgment (if any): _____
- e. Amount of child support paid and by whom: _____

6. **I acknowledge that I have a continuing duty to advise this Court of any custody, visitation, child support, or guardianship proceeding (including dissolution of marriage, separate maintenance, child neglect, or dependency) concerning the child(ren) in this state or any other state about which information is obtained during this proceeding.**

I certify that a copy of this document was [**one** only] () mailed () faxed and mailed () hand delivered to the person(s) listed below on {date} _____.

Other party or his/her attorney:

Name: _____
 Address: _____
 City, State, Zip: _____
 Fax Number: _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

 Signature of Party
 Printed Name: _____
 Address: _____
 City, State, Zip: _____
 Telephone Number: _____
 Fax Number: _____

STATE OF FLORIDA
 COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

 NOTARY PUBLIC or DEPUTY CLERK

 [Print, type, or stamp commissioned name of notary or clerk.]

___ Personally known
 ___ Produced identification, Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]
 I, {full legal name and trade name of nonlawyer} _____,
 a nonlawyer, located at {street} _____, {city} _____,
 {state} _____, {phone} _____, helped {name} _____,
 who is the [**one** only] ___ petitioner **or** ___ respondent, fill out this form.

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(e),
CHILD SUPPORT GUIDELINES WORKSHEET

When should this form be used?

You should complete this worksheet if **child support** is being requested in your case. If you know the income of the other **party**, this worksheet should accompany your **financial affidavit**. If you do not know the other party's income, this form must be completed after the other party files his or her financial affidavit, and **serves** a copy on you.

This form should be typed or printed in black ink. You should file the original with the **clerk of the circuit court** in the county where your case is filed and keep a copy for your records.

What should I do next?

A copy of this form must be mailed or hand delivered to the other party in your case, if it is not **served** on him or her with your initial papers.

Where can I look for more information?

Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms. The words that are in "**bold underline**" in these instructions are defined there. For further information, see section 61.30, Florida Statutes.

Special notes...

If this is a domestic violence case and you want to keep your address confidential for safety reasons, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Petitioner's Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(i).

The chart below contains the guideline amounts that you should use when calculating child support. This amount is based on the number of children and the combined income of the parents, and it is divided between the parents in direct proportion to their income or earning capacity. From time to time, some of the amounts in the child support guidelines chart will change. Be sure you have the most recent version of the chart before using it.

Because the guidelines are based on monthly amounts, it may be necessary to convert some income and expenses figures from other frequencies to monthly. You should do this as follows:

If payment is twice per month	Payment amount	×	2	=	Monthly amount
If payment is every two weeks	Payment amount	×	26	=	Yearly amount due
	Yearly amount	÷	12	=	Monthly amount
If payment is weekly	Weekly amount	×	52	=	Yearly amount due
	Yearly amount	÷	12	=	Monthly amount

If you or the other parent request that the court award an amount that is different than the guideline amount, you must also complete and attach a **Motion to Deviate from Child Support Guidelines**, Florida Supreme Court Approved Family Law Form 12.943.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law

Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page if every form he or she helps you complete.

CHILD SUPPORT GUIDELINES CHART

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
650.00	74	75	75	76	77	78
700.00	119	120	121	123	124	125
750.00	164	166	167	169	171	173
800.00	190	211	213	216	218	220
850.00	202	257	259	262	265	268
900.00	213	302	305	309	312	315
950.00	224	347	351	355	359	363
1000.00	235	365	397	402	406	410
1050.00	246	382	443	448	453	458
1100.00	258	400	489	495	500	505
1150.00	269	417	522	541	547	553
1200.00	280	435	544	588	594	600
1250.00	290	451	565	634	641	648
1300.00	300	467	584	659	688	695
1350.00	310	482	603	681	735	743
1400.00	320	498	623	702	765	790
1450.00	330	513	642	724	789	838
1500.00	340	529	662	746	813	869
1550.00	350	544	681	768	836	895
1600.00	360	560	701	790	860	920
1650.00	370	575	720	812	884	945
1700.00	380	591	740	833	907	971
1750.00	390	606	759	855	931	996
1800.00	400	622	779	877	955	1022
1850.00	410	638	798	900	979	1048
1900.00	421	654	818	923	1004	1074
1950.00	431	670	839	946	1029	1101
2000.00	442	686	859	968	1054	1128
2050.00	452	702	879	991	1079	1154
2100.00	463	718	899	1014	1104	1181
2150.00	473	734	919	1037	1129	1207
2200.00	484	751	940	1060	1154	1234
2250.00	494	767	960	1082	1179	1261
2300.00	505	783	980	1105	1204	1287
2350.00	515	799	1000	1128	1229	1314
2400.00	526	815	1020	1151	1254	1340
2450.00	536	831	1041	1174	1279	1367
2500.00	547	847	1061	1196	1304	1394
2550.00	557	864	1081	1219	1329	1420
2600.00	568	880	1101	1242	1354	1447
2650.00	578	896	1121	1265	1379	1473
2700.00	588	912	1141	1287	1403	1500
2750.00	597	927	1160	1308	1426	1524
2800.00	607	941	1178	1328	1448	1549
2850.00	616	956	1197	1349	1471	1573
2900.00	626	971	1215	1370	1494	1598
2950.00	635	986	1234	1391	1517	1622
3000.00	644	1001	1252	1412	1540	1647
3050.00	654	1016	1271	1433	1563	1671
3100.00	663	1031	1289	1453	1586	1695
3150.00	673	1045	1308	1474	1608	1720

3200.00	682	1060	1327	1495	1631	1744
3250.00	691	1075	1345	1516	1654	1769
3300.00	701	1090	1364	1537	1677	1793
3350.00	710	1105	1382	1558	1700	1818
3400.00	720	1120	1401	1579	1723	1842
3450.00	729	1135	1419	1599	1745	1867
3500.00	738	1149	1438	1620	1768	1891
3550.00	748	1164	1456	1641	1791	1915
3600.00	757	1179	1475	1662	1814	1940
3650.00	767	1194	1493	1683	1837	1964
3700.00	776	1208	1503	1702	1857	1987
3750.00	784	1221	1520	1721	1878	2009
3800.00	793	1234	1536	1740	1899	2031
3850.00	802	1248	1553	1759	1920	2053
3900.00	811	1261	1570	1778	1940	2075
3950.00	819	1275	1587	1797	1961	2097
4000.00	828	1288	1603	1816	1982	2219
4050.00	837	1302	1620	1835	2002	2141
4100.00	846	1315	1637	1854	2023	2163
4150.00	854	1329	1654	1873	2044	2185
4200.00	863	1342	1670	1892	2064	2207
4250.00	872	1355	1687	1911	2085	2229
4300.00	881	1369	1704	1930	2106	2251
4350.00	889	1382	1721	1949	2127	2273
4400.00	898	1396	1737	1968	2147	2295
4450.00	907	1409	1754	1987	2168	2317
4500.00	916	1423	1771	2006	2189	2339
4550.00	924	1436	1788	2024	2209	2361
4600.00	933	1450	1804	2043	2230	2384
4650.00	942	1463	1821	2062	2251	2406
4700.00	951	1477	1838	2081	2271	2428
4750.00	959	1490	1855	2100	2292	2450
4800.00	968	1503	1871	2119	2313	2472
4850.00	977	1517	1888	2138	2334	2494
4900.00	986	1530	1905	2157	2354	2516
4950.00	993	1542	1927	2174	2372	2535
5000.00	1000	1551	1939	2188	2387	2551
5050.00	1006	1561	1952	2202	2402	2567
5100.00	1013	1571	1964	2215	2417	2583
5150.00	1019	1580	1976	2229	2432	2599
5200.00	1025	1590	1988	2243	2447	2615
5250.00	1032	1599	2000	2256	2462	2631
5300.00	1038	1609	2012	2270	2477	2647
5350.00	1045	1619	2024	2283	2492	2663
5400.00	1051	1628	2037	2297	2507	2679
5450.00	1057	1638	2049	2311	2522	2695
5500.00	1064	1647	2061	2324	2537	2711
5550.00	1070	1657	2073	2338	2552	2727
5600.00	1077	1667	2085	2352	2567	2743
5650.00	1083	1676	2097	2365	2582	2759
5700.00	1089	1686	2109	2379	2597	2775
5750.00	1096	1695	2122	2393	2612	2791
5800.00	1102	1705	2134	2406	2627	2807
5850.00	1107	1713	2144	2418	2639	2820
5900.00	1111	1721	2155	2429	2651	2833
5950.00	1116	1729	2165	2440	2663	2847
6000.00	1121	1737	2175	2451	2676	2860
6050.00	1126	1746	2185	2462	2688	2874

6100.00	1131	1754	2196	2473	2700	2887
6150.00	1136	1762	2206	2484	2712	2900
6200.00	1141	1770	2216	2495	2724	2914
6250.00	1145	1778	2227	2506	2737	2927
6300.00	1150	1786	2237	2517	2749	2941
6350.00	1155	1795	2247	2529	2761	2954
6400.00	1160	1803	2258	2540	2773	2967
6450.00	1165	1811	2268	2551	2785	2981
6500.00	1170	1819	2278	2562	2798	2994
6550.00	1175	1827	2288	2573	2810	3008
6600.00	1179	1835	2299	2584	2822	3021
6650.00	1184	1843	2309	2595	2834	3034
6700.00	1189	1850	2317	2604	2845	3045
6750.00	1193	1856	2325	2613	2854	3055
6800.00	1196	1862	2332	2621	2863	3064
6850.00	1200	1868	2340	2630	2872	3074
6900.00	1204	1873	2347	2639	2882	3084
6950.00	1208	1879	2355	2647	2891	3094
7000.00	1212	1885	2362	2656	2900	3103
7050.00	1216	1891	2370	2664	2909	3113
7100.00	1220	1897	2378	2673	2919	3123
7150.00	1224	1903	2385	2681	2928	3133
7200.00	1228	1909	2393	2690	2937	3142
7250.00	1232	1915	2400	2698	2946	3152
7300.00	1235	1921	2408	2707	2956	3162
7350.00	1239	1927	2415	2716	2965	3172
7400.00	1243	1933	2423	2724	2974	3181
7450.00	1247	1939	2430	2733	2983	3191
7500.00	1251	1945	2438	2741	2993	3201
7550.00	1255	1951	2446	2750	3002	3211
7600.00	1259	1957	2453	2758	3011	3220
7650.00	1263	1963	2461	2767	3020	3230
7700.00	1267	1969	2468	2775	3030	3240
7750.00	1271	1975	2476	2784	3039	3250
7800.00	1274	1981	2483	2792	3048	3259
7850.00	1278	1987	2491	2801	3057	3269
7900.00	1282	1992	2498	2810	3067	3279
7950.00	1286	1998	2506	2818	3076	3289
8000.00	1290	2004	2513	2827	3085	3298
8050.00	1294	2010	2521	2835	3094	3308
8100.00	1298	2016	2529	2844	3104	3318
8150.00	1302	2022	2536	2852	3113	3328
8200.00	1306	2028	2544	2861	3122	3337
8250.00	1310	2034	2551	2869	3131	3347
8300.00	1313	2040	2559	2878	3141	3357
8350.00	1317	2046	2566	2887	3150	3367
8400.00	1321	2052	2574	2895	3159	3376
8450.00	1325	2058	2581	2904	3168	3386
8500.00	1329	2064	2589	2912	3178	3396
8550.00	1333	2070	2597	2921	3187	3406
8600.00	1337	2076	2604	2929	3196	3415
8650.00	1341	2082	2612	2938	3205	3425
8700.00	1345	2088	2619	2946	3215	3435
8750.00	1349	2094	2627	2955	3224	3445
8800.00	1352	2100	2634	2963	3233	3454
8850.00	1356	2106	2642	2972	3242	3464
8900.00	1360	2111	2649	2981	3252	3474
8950.00	1364	2117	2657	2989	3261	3484

9000.00	1368	2123	2664	2998	3270	3493
9050.00	1372	2129	2672	3006	3279	3503
9100.00	1376	2135	2680	3015	3289	3513
9150.00	1380	2141	2687	3023	3298	3523
9200.00	1384	2147	2695	3032	3307	3532
9250.00	1388	2153	2702	3040	3316	3542
9300.00	1391	2159	2710	3049	3326	3552
9350.00	1395	2165	2717	3058	3335	3562
9400.00	1399	2171	2725	3066	3344	3571
9450.00	1403	2177	2732	3075	3353	3581
9500.00	1407	2183	2740	3083	3363	3591
9550.00	1411	2189	2748	3092	3372	3601
9600.00	1415	2195	2755	3100	3381	3610
9650.00	1419	2201	2763	3109	3390	3620
9700.00	1422	2206	2767	3115	3396	3628
9750.00	1425	2210	2772	3121	3402	3634
9800.00	1427	2213	2776	3126	3408	3641
9850.00	1430	2217	2781	3132	3414	3647
9900.00	1432	2221	2786	3137	3420	3653
9950.00	1435	2225	2791	3143	3426	3659
10000.00	1437	2228	2795	3148	3432	3666

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent.

NOTICE OF FILING CHILD SUPPORT GUIDELINES WORKSHEET

PLEASE TAKE NOTICE, that {name} _____, is filing his/her
Child Support Guidelines Worksheet attached and labeled Exhibit 1.

CERTIFICATE OF SERVICE

I certify that a copy of this Notice of Filing with the Child Support Guidelines Worksheet was [**one** only]
() mailed () mailed and faxed () hand delivered to the person(s) listed below on {date} _____.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

Signature of Party

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
1. Present Net Monthly Income Enter the amount from line number 27 of Florida Family Law Rules of Procedure Form 12.902(b) or (c), Financial Affidavit			
2. Basic Monthly Obligation There is (are) <i>{number}</i> minor child(ren) common to the parties. Using the total amount from line 1, enter the appropriate amount from the child support guidelines chart.			
3. Percent of Financial Responsibility Divide the amount on line 1A by the total amount on line 1 to get Father's percentage financial responsibility. Enter answer on line 3A. Divide the amount on line 1B by the total amount on line 1 to get Mother's percentage financial responsibility. Enter answer on line 3B.	.%	.%	
4. Share of Basic Monthly Obligations Multiply the number on line 2 by the percentage on line 3A to get Father's share of basic obligation. Enter answer on line 4A. Multiply the number on line 2 by the percentage on line 3B to get Mother's share of basic obligation. Enter answer on line 4B.			
Additional Support – Health Insurance, Child Care & Other			
5a. 75% of Monthly Child Care Costs [Child care costs should not exceed the level required to provide quality care from a licensed source for the child(ren). See section 61.30(7), Fla. Stat. for more information.]			
5b. Total Monthly Child(ren)'s Health Insurance Cost [This is only amounts actually paid for health insurance on the child(ren).]			
5c. Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs			
5d. Total Monthly Child Care & Health Costs [Add lines 5a+5b+5c]			
6. Additional Support Payments Multiply the number on line 5d by the percentage on line 3A to determine the Father's share. Enter answer on line 6A. Multiply the number on line 5d by the percentage on line 3B to determine the Mother's share. Enter answer on line 6B.			
Statutory Adjustments/Credits			
7a. Monthly child care payments actually made			
7b. Monthly health insurance payments actually made			
7c. Other payments/credits actually made for any noncovered medical, dental and prescription medication expenses of the child(ren) not ordered to be separately paid on a percentage basis. [See § 61.30(8), Florida Statutes]			
8. Total Support Payments actually made [Add 7a through 7c]			
9. MINIMUM CHILD SUPPORT OBLIGATION FOR EACH PARENT [Line 4 plus line 6; minus line 8]			
Substantial Shared Parenting (GROSS UP METHOD) If the noncustodial parent exercises visitation at least 40 percent of the overnights in the year (146 overnights in the year), complete Nos. 10 through 21			
10. Basic Monthly Obligation x 150% [Multiply line 2 by 1.5]			
11. Increased Basic Obligation for each parent Multiply the number on line 10 by the percentage on line 3A to determine the Father's share. Enter answer on line 11A. Multiply the number on line 10 by the percentage on line 3B to determine the Mother's share. Enter answer on line 11B.			
12. Percentage of overnight stays with each parent The child(ren) spend(s) _____ overnight stays with the father each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12A. The child(ren) spend(s) _____ overnight stays with the mother each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12B.	.%	.%	
13. Parent's support multiplied by other Parent's percentage of overnights [Multiply line 11A by line 12B. Enter this number on line 13A. Multiply line 11B by line 12A. Enter this number in 13B.]			
Additional Support – Health Insurance, Child Care & Other			

CHILD SUPPORT GUIDELINES WORKSHEET			
14a. Total Monthly Child Care Costs <small>[Child care costs should not exceed the level required to provide quality care from a licensed source for the child(ren). See section 61.30(7), Fla. Stat. for more information.]</small>			
14b. Total Monthly Child(ren)'s Health Insurance Cost <small>[This is only amounts actually paid for health insurance on the child(ren).]</small>			
14c. Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs			
14d. Total Monthly Child Care & Health Costs <small>[Add lines 14a+14b+14c]</small>			
15. Additional Support Payments <small>Multiply the number on line 14d by the percentage on line 3A to determine the Father's share. Enter answer on line 15A. Multiply the number on line 14d by the percentage on line 3B to determine the Mother's share. Enter answer on line 15B.</small>			
Statutory Adjustments/Credits			
16a. Monthly Child Care payments actually made			
16b. Monthly health insurance payments actually made			
16c. Other payments/credits actually made for any noncovered medical, dental and prescription medication expenses of the child(ren) not ordered to be separately paid on a percentage basis. <small>[See § 61.30(8), Florida Statutes]</small>			
17. Total Support Payments actually made <small>[Add 16a through 16c]</small>			
18. Total Additional Support Transfer Amount <small>[Line 15 minus line 17; Enter any negative number as zero]</small>			
19. Total Child Support Owed from Father to Mother <small>[Add line 13A+18A]</small>			
20. Total Child Support Owed from Mother to Father <small>[Add line 13B+18B]</small>			
21. Actual Child Support to Be Paid. <small>[Comparing lines 19 and 20, Subtract the smaller amount owed from the larger amount owed and enter the result in the column for the parent that owes the larger amount of support]</small>	\$ _____ -or- \$ _____		

ADJUSTMENTS TO GUIDELINES AMOUNT. If you or the other parent is requesting the Court to award a child support amount that is more or less than the child support guidelines, you must complete and file Motion to Deviate from Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943.

[✓ one only]

- _____ a. **Deviation from the guidelines amount is requested.** The Motion to Deviate from the Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943, is attached.
- _____ b. **Deviation from the guidelines amount is NOT requested.** The Motion to Deviate from the Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943, is not attached.

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [Fill in all blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} _____, helped {name} _____,
who is the [✓ one only] ___ petitioner or ___ respondent, fill out this form.

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.932,
CERTIFICATE OF COMPLIANCE WITH MANDATORY DISCLOSURE

When should this form be used?

Mandatory disclosure requires each **party** in a **dissolution of marriage** case to provide the other party with certain financial information and documents. These documents must be provided by mail or hand delivery to the other party within 45 days of **service** of the petition for **dissolution of marriage** or supplemental petition for modification on the **respondent**. The mandatory disclosure rule applies to all original and **supplemental** dissolution of marriage cases, except simplified dissolution of marriage cases and cases where the respondent is served by **constructive service** and does not answer. You should use this form to notify the court and the other party that you have complied with the mandatory disclosure rule.

Each party must provide the other party with the documents listed in section 2 of this form if the relief being sought is permanent regardless of whether it is an initial or supplemental proceeding. Of the documents listed on this form, the **financial affidavit and child support guidelines worksheet** are the only documents that must be **filed** with the court **and** sent to the other party; all other documents should be sent to the other party but not filed with the court. If your individual gross annual income is under \$50,000, you should complete the **Family Law Financial Affidavit (Short Form)**, Florida Family Law Rules of Procedure Form 12.902(b). If your individual gross annual income is \$50,000 or more, you should complete the **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(c).

In addition, there are separate mandatory disclosure requirements that apply to **temporary financial hearings**, which are listed in section 1 of this form. The party seeking temporary financial relief must serve these documents on the other party with the notice of temporary financial hearing. The responding party must either deliver the required documents to the party seeking temporary relief on or before 5:00 p.m., 2 business days before the hearing on temporary relief, **or** mail (postmark) them to the other party seeking temporary relief 7 days before the hearing on temporary financial relief. Any documents that have already been served under the requirements for temporary or initial proceedings, do not need to be reserved again in the same proceeding. If a supplemental petition is filed, seeking modification, then the mandatory disclosure requirements begin again.

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where your case is filed and keep a copy for your records. A copy of this form must be mailed **or** hand delivered to any other party in your case.

What should I do next?

After you have provided the other party all of the financial information and documents and have filed this form certifying that you have complied with this rule, you are under a continuing duty to promptly give the other party any information or documents that change your financial status or that make the information already provided inaccurate. You should not file with the clerk any of the documents listed in the certificate of compliance other than the financial affidavit and child support guidelines worksheet. Refer to the instructions regarding the **petition** in your case to determine how you should proceed after filing this form.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). For further information, see rule 12.285, Florida Family Law Rules of Procedure.

Special notes...

You may provide copies of required documents; however, the originals must be produced for inspection if the other party requests to see them.

Although the financial affidavits are based on individual gross income, either party may ask the other party to complete the **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(c), by serving the appropriate interrogatory form. (See **Standard Family Law Interrogatories**, Florida Family Law Rules of Procedure Form 12.930(b) (original proceedings) or (c) (modification proceedings)).

Any portion of the mandatory disclosure rule may be modified by order of the **judge** or agreement of the parties. Therefore, you and your **spouse** may agree that you will not require each other to produce the documents required under the mandatory disclosure rule. This exception does **not** apply to the **Financial Affidavit**, Family Law Rules of Procedure Form 12.902(b) or (c), which is required in all cases and cannot be waived.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,

and

Respondent.

CERTIFICATE OF COMPLIANCE WITH MANDATORY DISCLOSURE

I, *{full legal name}* _____, certify that I have complied with the mandatory disclosure required by Florida Family Law Rule 12.285 as follows:

1. FOR TEMPORARY FINANCIAL RELIEF, ONLY:

The date the following documents were served: _____.

[**all** that apply]

- ___ a. Financial Affidavit (Filing of a Financial Affidavit cannot be waived.)
 - () Florida Family Law Rules of Procedure Form 12.902(b) (short form)
 - () Florida Family Law Rules of Procedure Form 12.902(c) (long form)
- ___ b. () All personal (1040) federal tax, gift tax, and intangible personal property tax returns for the preceding year; or
 - () Transcript of tax return as provided by IRS form 4506-T; or
 - () IRS forms W-2, 1099, and K-1 for the past year because the income tax return for the past year has not been prepared.
- ___ c. Pay stubs or other evidence of earned income for the 3 months before the service of the financial affidavit.

2. FOR INITIAL, SUPPLEMENTAL, AND PERMANENT FINANCIAL RELIEF:

The date the following documents were served: _____.

[**all** that apply]

- ___ a. Financial Affidavit (Filing of a Financial Affidavit cannot be waived.)
 - () Florida Family Law Rules of Procedure Form 12.902(b) (short form)
 - () Florida Family Law Rules of Procedure Form 12.902(c) (long form)
- ___ b. () All personal (1040) federal and state tax income returns, gift tax returns, and intangible personal property tax returns for the preceding 3 years;
 - () IRS forms W-2, 1099, and K-1 for the past year because the income tax return for the past year has not been prepared.
- ___ c. Pay stubs or other evidence of earned income for the 3 months before the service of the financial affidavit.
- ___ d. A statement identifying the source and amount of all income for the 3 months before the service of the financial affidavit, if not reflected on the pay stubs produced.
- ___ e. All loan applications and financial statements prepared for any purpose or used for any purpose within the 12 months preceding the service of the financial affidavit.
- ___ f. All deeds to real estate in which I presently own or owned an interest within the past 3 years. All promissory notes in which I presently own or owned an interest within the last 12 months. All present leases in which I own an interest.
- ___ g. All periodic statements for the last 3 months for all checking accounts and for the last year for all savings accounts, money market funds, certificates of deposit, etc.

- ___ h. All brokerage account statements for the last 12 months.
- ___ i. Most recent statement for any pension, profit sharing, deferred compensation, or retirement plan (for example, IRA, 401(k), 403(b), SEP, KEOGH, etc.) and summary plan description for any such plan in which I am a participant or alternate payee.
- ___ j. The declaration page, the last periodic statement, and the certificate for any group insurance for all life insurance policies insuring my life or the life of me or my spouse.
- ___ k. All health and dental insurance cards covering either me or my spouse and/or our dependent child(ren).
- ___ l. Corporate, partnership, and trust tax returns for the last 3 tax years, in which I have an ownership or interest greater than or equal to 30%.
- ___ m. All credit card and charge account statements and other records showing my (our) indebtedness as of the date of the filing of this action and for the prior 3 months. All promissory notes on which I presently owe or owned within the past year. All lease agreements I presently owe.
- ___ n. All premarital and marital agreements between the parties to this case.
- ___ o. If a modification proceeding, all written agreements entered into between the parties at any time since the order to be modified was entered.
- ___ p. All documents and tangible evidence relating to claims for special equity or nonmarital status of an asset or debt.
- ___ q. Any court order directing that I pay or receive spousal support (alimony) or child support.

I certify that a copy of this document was [**one** only] () mailed () faxed and mailed () hand delivered to the person(s) listed below on *{date}* _____.

I understand that I am swearing or affirming under oath to the accuracy of my compliance with the mandatory disclosure requirements of Fla. Fam. L. R. P. 12.285 and that, unless otherwise indicated with specificity, this disclosure is complete. I further understand that the punishment for knowingly making a false statement or incomplete disclosure includes fines and/or imprisonment.

Other party or his/her attorney:

Name: _____
 Address: _____
 City, State, Zip: _____
 Fax Number: _____
 Dated: _____

 Signature of Party
 Printed Name: _____
 Address: _____
 City, State, Zip: _____
 Telephone Number: _____
 Fax Number: _____

STATE OF FLORIDA
 COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

 NOTARY PUBLIC or DEPUTY CLERK

 [Print, type, or stamp commissioned name of notary or clerk.]

Personally known
 Produced identification
 Type of identification produced: _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]

I, *{full legal name and trade name of nonlawyer}* _____,
 a nonlawyer, located at *{street}* _____, *{city}* _____,
{state} _____, *{phone}* _____, helped *{name}* _____,
 who is the [**one** only] ___ petitioner **or** ___ respondent, fill out this form.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

CASE NO. _____
DIVISION _____

Petitioner,

and

Respondent.

_____ /

NOTICE OF RELATED CASES

Pursuant to Fla. R. Jud. Admin. 2.545(d), the (Petitioner/Plaintiff/Respondent/Defendant) by and through his/her undersigned attorney, hereby gives notice that the following court action(s) involving one or more of the above-named persons, the children of these persons in the case of a family law matter, or the same issues, is/are pending:

1.

Case caption and case number -If unknown, state the names of the parties and the county in which the action is pending. For juvenile cases, children may be identified by initials.

Brief statement as to how the cases are related

If a family law case, a statement as to whether assignment to one judge or another method of coordination will conserve judicial resources and promote an efficient determination of the actions

2.

Case caption and case number -If unknown, state the names of the parties and the county in which the action is pending. For juvenile cases, children may be identified by initials.

Brief statement as to how the cases are related

If a family law case, a statement as to whether assignment to one judge or another method of coordination will conserve judicial resources and promote an efficient determination of the actions

If the related cases involve the minor children of the parties, list the children's names and date of birth:

Name	Date of birth
Name	Date of birth
Name	Date of birth
Name	Date of birth

Use additional sheets if necessary for either cases or children's names.

If any related cases are identified, a copy of this notice must be served on the presiding judges, the administrative judge, and all parties in the related cases and the following certificate of service must be completed.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true copy of this Notice of Related Cases has been provided either by hand-delivery or U.S. mail to the following addressees on _____, 200__.

Presiding judge

Presiding judge

Administrative judge

Party to related case


Party to related case

Party to related case

 Name
 Address
 Telephone

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.902(f)(1),
MARITAL SETTLEMENT AGREEMENT FOR DISSOLUTION OF MARRIAGE
WITH DEPENDENT OR MINOR CHILD(REN)

When should this form be used?

This form should be used when a **Petition for Dissolution of Marriage with Dependent or Minor Child(ren)**,  Florida Supreme Court Approved Family Law Form 12.901(b)(1), has been **filed** and **the parties** have reached an agreement on some or all of the issues at hand.

This form should be typed or printed in black ink. **Both** parties must sign the agreement and have their signatures witnessed by a **notary public** or **deputy clerk**. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where the **petition** was filed and keep a copy for your records. You should then refer to the instructions for your petition, **answer**, or answer and **counterpetition** concerning the procedures for setting a hearing or **trial (final hearing)**.


Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in “**bold underline**” in these instructions are defined there. For further information, see chapter 61, Florida Statutes, and the instructions for the petition and/or answer that were filed in this case.

Special notes...

With this form you must also file a **Child Support Guidelines Worksheet**,  Florida Family Law Rules of Procedure Form 12.902(e), if not already filed.

This form does not act to transfer title to the property. Such transfer must be done by deed or supplemental final judgment.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,

and

Respondent.

**MARITAL SETTLEMENT AGREEMENT FOR DISSOLUTION OF MARRIAGE
WITH DEPENDENT OR MINOR CHILD(REN)**

We, {Husband's full legal name} _____,
and {Wife's full legal name} _____,
being sworn, certify that the following statements are true:

1. We were married to each other on {date} _____.
2. Because of irreconcilable differences in our marriage (no chance of staying together), we have made this agreement to settle once and for all what we owe to each other and what we can expect to receive from each other. Each of us states that nothing has been held back, that we have honestly included everything we could think of in listing our assets (everything we own and that is owed to us) and our debts (everything we owe), and that we believe the other has been open and honest in writing this agreement.
3. We have both filed a Family Law Financial Affidavit, Florida Family Law Rules of Procedure Form 12.902(b) or (c). Because we have voluntarily made full and fair disclosure to each other of all our assets and debts, we waive any further disclosure under rule 12.285, Florida Family Law Rules of Procedure.
4. Each of us agrees to execute and exchange any papers that might be needed to complete this agreement, including deeds, title certificates, etc.

SECTION I. MARITAL ASSETS AND LIABILITIES

A. Division of Assets. We divide our assets (everything we own and that is owed to us) as follows: Any personal item(s) not listed below is the property of the party currently in possession of the item(s).

1. Wife shall receive as her own and Husband shall have no further rights or responsibilities regarding these assets:

ASSETS: DESCRIPTION OF ITEM(S) WIFE SHALL RECEIVE (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any title/deed/account described below is wife's, husband's, or both.)	Current Fair Market Value
<input type="checkbox"/> Cash (on hand)	\$
<input type="checkbox"/> Cash (in banks/credit unions)	
<input type="checkbox"/>	
<input type="checkbox"/> Stocks/Bonds	

ASSETS: DESCRIPTION OF ITEM(S) WIFE SHALL RECEIVE (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any title/deed/account described below is wife's, husband's, or both.)	Current Fair Market Value
<input type="checkbox"/>	
<input type="checkbox"/> Notes (money owed to you in writing)	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Money owed to you (not evidenced by a note)	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Real estate: (Home)	
<input type="checkbox"/> (Other)	
<input type="checkbox"/>	
<input type="checkbox"/> Business interests	
<input type="checkbox"/>	
<input type="checkbox"/> Automobiles	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Boats	
<input type="checkbox"/> Other vehicles	
<input type="checkbox"/>	
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Furniture & furnishings in home	
<input type="checkbox"/>	
<input type="checkbox"/> Furniture & furnishings elsewhere	
<input type="checkbox"/>	
<input type="checkbox"/> Collectibles	
<input type="checkbox"/>	
<input type="checkbox"/> Jewelry	
<input type="checkbox"/>	
<input type="checkbox"/> Life insurance (cash surrender value)	
<input type="checkbox"/>	
<input type="checkbox"/> Sporting and entertainment (T.V., stereo, etc.) equipment	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Other assets	

ASSETS: DESCRIPTION OF ITEM(S) WIFE SHALL RECEIVE (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any title/deed/account described below is wife's, husband's, or both.)	Current Fair Market Value
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
Total Assets to Wife	\$ _____

2. Husband shall receive as his own and Wife shall have no further rights or responsibilities regarding these assets:

ASSETS: DESCRIPTION OF ITEM(S) HUSBAND SHALL RECEIVE (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any title/deed/account described below is wife's, husband's or both.)	Current Fair Market Value
<input type="checkbox"/> Cash (on hand)	\$ _____
<input type="checkbox"/> Cash (in banks/credit unions)	
<input type="checkbox"/>	
<input type="checkbox"/> Stocks/Bonds	
<input type="checkbox"/>	
<input type="checkbox"/> Notes (money owed to you in writing)	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Money owed to you (not evidenced by a note)	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Real estate: (Home)	
<input type="checkbox"/> (Other)	
<input type="checkbox"/>	
<input type="checkbox"/> Business interests	
<input type="checkbox"/>	
<input type="checkbox"/> Automobiles	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/> Boats	
<input type="checkbox"/> Other vehicles	
<input type="checkbox"/>	
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)	

LIABILITIES: DESCRIPTION OF DEBT(S) TO BE PAID BY WIFE (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any mortgage, note, or account described below is wife's, husband's, or both.)	Monthly Payment	Current Amount Owed
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/> Auto loan		
<input type="checkbox"/> Auto loan		
<input type="checkbox"/> Bank/credit union loans		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/> Money you owe (not evidenced by a note)		
<input type="checkbox"/>		
<input type="checkbox"/> Judgments		
<input type="checkbox"/>		
<input type="checkbox"/> Other		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
Total Debts to Be Paid by Wife	\$	\$

2. Husband shall pay as his own the following and will not at any time ask Wife to pay these debts/bills:

LIABILITIES: DESCRIPTION OF DEBT(S) TO BE PAID BY HUSBAND (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any mortgage, note or account described below is wife's, husband's, or both.)	Monthly Payment	Current Amount Owed
<input type="checkbox"/> Mortgages on real estate: (Home)	\$	\$
<input type="checkbox"/> (Other)		
<input type="checkbox"/>		
<input type="checkbox"/> Charge/credit card accounts		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

LIABILITIES: DESCRIPTION OF DEBT(S) TO BE PAID BY HUSBAND (To avoid confusion at a later date, describe each item as clearly as possible. You do not need to list account numbers. Where applicable, include whether the name on any mortgage, note or account described below is wife's, husband's, or both.)	Monthly Payment	Current Amount Owed
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/> Auto loan		
<input type="checkbox"/> Auto loan		
<input type="checkbox"/> Bank/credit union loans		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/> Money you owe (not evidenced by a note)		
<input type="checkbox"/>		
<input type="checkbox"/> Judgments		
<input type="checkbox"/>		
<input type="checkbox"/> Other		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
Total Debts to Be Paid by Husband	\$	\$

C. Contingent Assets and Liabilities (listed in Section III of our Family Law Financial Affidavits) will be divided as follows: _____

SECTION II. SPOUSAL SUPPORT (ALIMONY) (If you have not agreed on this matter, write “n/a” on the lines provided.)

[one only]

- _____ 1. **Each of us forever gives up any right to spousal support (alimony) that we may have.**
 - _____ 2. () HUSBAND () WIFE agrees to pay spousal support (alimony) in the amount of \$ _____ every () week () other week () month, beginning {date} _____ and continuing until {date or event} _____.
- Explain type of alimony (temporary, permanent, rehabilitative, and/or lump sum) and any other specifics: _____
- _____

[if applies] () Life insurance in the amount of \$ _____ to secure the above support, will be provided by the obligor.

SECTION III. CHILD CUSTODY, PARENTAL RESPONSIBILITY, AND VISITATION

(If you have **not** reached an agreement on any of these issues, write “n/a” on the lines provided. The Court reserves the right to modify any agreement(s) concerning the minor child(ren).)

1. **The parties' minor child(ren) are:**

Name	Birth date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. **Parental responsibility** for the minor child(ren) will be:

a. shared *{explain any exceptions}* _____

b. sole to () Father () Mother *{explain reasons}* _____

3. **The primary residential parent** will be () Father () Mother and the other parent will be the secondary residential parent **OR** the primary residential parent will be () undesignated () rotating.

4. **Secondary Residential Responsibility, Visitation, or Time Sharing** will be as follows: *{explain schedule (days and times, holidays, etc.)}* _____

{explain how parents will communicate regarding arrangements or any other issues relating to the child(ren)} _____

{explain how parents will handle situations when one parent is unable to meet the schedule, for example, notice requirements to the other parent} _____

{explain how the child(ren) will be exchanged, for example, location(s), by third parties, etc.} _____

{explain any other agreed-upon arrangements} _____

- 5. Neither parent shall take the child(ren) from the custody of the other parent or any child care provider or other person entrusted by the other parent with the care of the child(ren) without the agreement of the other party during the other party’s time of parental responsibility or visitation.

SECTION IV. CHILD SUPPORT

- 1. () Mother () Father will pay child support, under Florida’s child support guidelines, section 61.30, Florida Statutes, to the primary residential or sole parent named above. Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), is completed and attached.

This parent shall be obligated to pay child support in the amount of \$ _____, every () week () other week () month, beginning {date} _____ and continuing until modified by court order, the youngest child turns 18, becomes emancipated, marries, dies, otherwise becomes self-supporting or, if after the age of 18, until {date} _____. If the child support amount above deviates from the guidelines by 5% or more, explain the reason(s) here: _____

- 2. **Child Support Arrearage.** There currently is a child support arrearage of \$ _____ for retroactive child support and/or \$ _____ for previously ordered unpaid child support. The total of \$ _____ in child support arrearage shall be repaid at the rate of \$ _____ every () week () other week () month, beginning {date} _____, until paid in full including statutory interest.

- 3. **Health Insurance.** () Mother () Father will maintain health insurance coverage for the parties' minor child(ren). The party providing coverage will provide insurance cards to the other party showing coverage. **OR** () Health insurance is not reasonably available at this time. Any uninsured/ unreimbursed medical costs for the minor child(ren) shall be assessed as follows:
 - ___ a. Shared equally by both parents.
 - ___ b. Prorated according to the child support guideline percentages.
 - ___ c. Other *{explain}*: _____

As to these uninsured/unreimbursed medical expenses, the party who incurs the expense shall submit a request for reimbursement to the other party within 30 days, and the other party, within 30 days of receipt, shall submit the applicable reimbursement for that expense, according to the schedule of reimbursement set out in this paragraph.

- 4. **Dental Insurance.** () Mother () Father will maintain () dental insurance coverage for the parties' minor child(ren). The party providing coverage will provide insurance cards to the other party showing coverage. **OR** () dental insurance is not reasonably available at this time. Any uninsured/ unreimbursed dental costs for the minor child(ren) shall be assessed as follows:
 - ___ a. Shared equally by both parents.
 - ___ b. Prorated according to the child support guideline percentages.
 - ___ c. Other *{explain}*: _____

As to these uninsured/unreimbursed dental expenses, the party who incurs the expense shall submit a request for reimbursement to the other party within 30 days, and the other party, within 30 days of receipt, shall submit the applicable reimbursement for that expense, according to the schedule of reimbursement set out in this paragraph.

- 5. **Life Insurance.** () Mother () Father shall be required to maintain life insurance coverage for the benefit of the parties' minor child(ren) in the amount of \$ _____ until the youngest child turns 18, becomes emancipated, marries, dies, or otherwise becomes self-supporting.

- 6. **IRS Income Tax Deduction(s).** The parent granted primary residential responsibility or sole parental responsibility of the parties' minor child(ren) shall have the benefit of any tax deductions for the child(ren) or as follows: *{explain}* _____

The other parent will convey any applicable IRS form regarding the income tax deduction.

- 7. Other provisions relating to child support (e.g., uninsured medical/dental expenses, insurance coverage, life insurance to secure child support, orthodontic payments, college fund, etc.): _____

SECTION V. OTHER

SECTION VI. We have not agreed on the following issues:

I certify that I have been open and honest in entering into this settlement agreement. I am satisfied with this agreement and intend to be bound by it.

Dated: _____

Signature of Husband
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

____ Personally known
____ Produced identification
____ Type of identification produced

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [✎ fill in all blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} _____, helped {Husband's name} _____,
who is the [✓ one only] ___ petitioner or ___ respondent, fill out this form.

I certify that I have been open and honest in entering into this settlement agreement. I am satisfied with this agreement and intend to be bound by it.

Dated: _____

Signature of Wife
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

___ Personally known
___ Produced identification
___ Type of identification produced

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [✗ fill in all blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} _____, helped {Wife's name} _____,
who is the [✓ one only] ___ petitioner or ___ respondent, fill out this form.

**SUMMARY OF ADMINISTRATIVE ORDER 5.1120(E)
ORDER AND NOTICE FOR PARENT EDUCATION
AND FAMILY STABILIZATION COURSE**

This summary has been prepared to help parties involved in certain types of family cases involving children understand what is required of them by the law and the administrative order. A copy of the complete administrative order is available from the Clerk's Office or online at www.circuit8.org , under Circuit Information, then Administrative Orders, then Family.

1. Both parties **must attend a parent education and family stabilization course in the following types of cases:**
 - a. Dissolution of marriage (divorce) where minor children are involved
 - b. Paternity actions involving issues of parental responsibility
 - c. Actions to modify (change) visitation
 - d. Actions to modify (change) primary parental responsibility
2. For dissolution actions, all petitioners required to complete the parenting course must do so within 45 days after filing the petition and all other parties must complete the course within 45 days after service of the petition.
3. For paternity actions, petitioners must complete the course within 45 days after filing the petition and all other parties must complete the course within 45 days after an acknowledgment of paternity by that party, an adjudication of paternity of that party, or an order granting visitation to, or support from, that party.
4. The parties may attend separate courses.
5. The fee for the course is \$40.00 for each person. Either party may request that the Court reduce the fee to \$5.00 based on the party's financial affidavit of indigency.
6. All parties must file a certificate of completion with the court before the entry of the final judgment.

APPROVED PARENTING EDUCATION COURSES IN THE EIGHTH JUDICIAL CIRCUIT

The following are approved courses in the Eighth Judicial Circuit that meet the requirements of section 61.21, Florida Statutes, and Administrative Order No. 5.1120 (D). **PLEASE CALL EACH PROVIDER FOR ADDITIONAL INFORMATION.**

A Positive Divorce Resolution

Classes are held weekly in Gainesville, Monthly in Starke and Macclenny. Call (352) 375-4399 in Gainesville or toll free (888) 747-5362 (24 hour/day 7 days/week).

Class schedules and online registration are available at www.divorce-resolution.com.

In The Best Interest Of Children And Family

When Parents are No Longer a Couple

Courses are offered twice monthly: Tuesdays 6:00PM to 10:00PM & Saturdays 9:00AM to 1:00PM.

Gainesville Family Institute, 1031 NW 6th Street, Bldg. C, Gainesville, FL 32601

Phone: (352) 376-5543 Fax: (352) 376-2042

Parents, Children And Divorce

Offering classes throughout the Eighth Judicial Circuit as well as most counties in the State of Florida.

Classes are offered evenings and Saturday mornings. Web Site: www.educationprograms.com

E-mail: pcd@educationprograms.com Phone: (800) 767-8193

Parent Education And Family Stabilization Course

Alliance for Better Co-Parenting, Inc.

Alachua County, 2nd and 4th Thursday (6:00 pm) and 2nd and 4th Saturday (1:00 pm) of each month.

Satellite Offices: (Bradford, Levy and Union Counties): call (866) 632-7296 for location and schedule.

Main Office - 4509 NW 23rd Ave., Suite 4, Gainesville, FL 32606

Phone: (352) 379-4665 Fax: (352) 377-0002

email contact: (for Info/Class Schedule) mentalhealth@prodigy.net

List of Approved Web-Based Courses

www.parentingchoice.com

www.onlinedivorceprogram.com

www.divorce-resolution.com

www.floridaparentingcourse.com

www.floridaparenting.com

www.floridadivorceeducation.com

NOTE: Online courses will be accepted upon showing a special need, such as disability, military service, or residence in a State where such a course is not available.

FORMS FOR THE RESPONDENT

(the person responding to the petition for the divorce)

The following blank forms are included in this packet for the Respondent to fill out:

- ♦ Answer and Waiver*
- ♦ Family Law Financial Affidavit*
- ♦ Parenting Education Brochure

* Must be signed by Respondent and notarized by a Notary Public.

IMPORTANT

The Respondent must file the original documents with the Clerk of Court, CIVIL Department, and furnish the Petitioner with a set of copies of all forms completed by the Respondent. The Clerk of the Court is located on the first floor of the Alachua County Family/Civil Justice Center, 201 E. University Avenue, Gainesville, FL 32601. Documents (with filing fee) may also be submitted to the Clerk of Court by mail at P.O. Box 600, Gainesville, FL 32602. The Clerk of Court may be reached by calling (352) 374-3636.

IN THE CIRCUIT COURT, EIGHTH JUDICIAL CIRCUIT,
IN AND FOR ALACHUA COUNTY, FLORIDA

IN RE: The Marriage of

Petitioner,
and

CASE NO.: _____
DIVISION: _____

Respondent.

ANSWER AND WAIVER

THE RESPONDENT, _____, responding to the Petition for Dissolution of Marriage filed herein says:

1. Respondent, has received a copy of the Petition and _____ (write **denies** or **admits**) the allegations contained in sections ____ through ____ of the Petition dated _____.
2. Respondent submits him/herself to the jurisdiction of this Court, and waives service of process of the Petition for Dissolution of Marriage but does **not** waive further notice in this action, specifically notice of the entry of Final Judgment pursuant to Fla. R. Civ. P. 1.440(b).

Respondent's Signature

Respondent's Mailing Address

Respondent's Telephone Number

STATE OF _____
COUNTY OF _____

Sworn to (or affirmed) and **subscribed** before me this ____ day of _____, 20____, by _____ Personally known **OR** _____ Produced Identification, Type of Identification Produced, and number _____.

(seal)

Notary Public

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Answer and Waiver has been furnished by United States mail/hand delivery to _____, Petitioner, on _____, 20____.

Respondent's Signature

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(b),
FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM)

When should this form be used?

This form should be used when you are involved in a family law case which requires a **financial affidavit** and your individual gross income is **UNDER \$50,000 per year**.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public** or **deputy clerk**. You should **file** the original with the **clerk of the circuit court** in the county where the **petition** was filed and keep a copy for your records.

What should I do next?

A copy of this form must be mailed or hand delivered to the other **party** in your case, if it is not served on him or her with your initial papers. This must be accomplished within 45 days of service of the petition.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). The words that are in **“bold underline”** in these instructions are defined there. For further information, see rule 12.285, Florida Family Law Rules of Procedure.

Special notes...

If this is a domestic violence case and you want to keep your address confidential for safety reasons, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Petitioner’s Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

The affidavit must be completed using **monthly** income and expense amounts. If you are paid or your bills are due on a schedule which is not monthly, you must convert those amounts. Hints are provided below for making these conversions.

Hourly - If you are paid by the hour, you may convert your income to monthly as follows:				
Hourly amount	x	Hours worked per week	=	Weekly amount
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Daily - If you are paid by the day, you may convert your income to monthly as follows:				
Daily amount	x	Days worked per week	=	Weekly amount
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Weekly - If you are paid by the week, you may convert your income to monthly as follows:				
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Bi-weekly - If you are paid every two weeks, you may convert your income to monthly as follows:				
Bi-weekly amount	x	26	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Semi-monthly - If you are paid twice per month, you may convert your income to monthly as follows:				
Semi-monthly amount	x	2	=	Monthly Amount

Expenses may be converted in the same manner.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

PRESENT MONTHLY DEDUCTIONS:

- 18. Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities)
 - a. Filing Status _____
 - b. Number of dependents claimed _____
- 19. Monthly FICA or self-employment taxes
- 20. Monthly Medicare payments
- 21. Monthly mandatory union dues
- 22. Monthly mandatory retirement payments
- 23. Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship
- 24. Monthly court-ordered child support actually paid for children from another relationship
- 25. Monthly court-ordered alimony actually paid
 - 25a. from this case: \$ _____
 - 25b. from other case(s): _____

18. \$ _____
 19. _____
 20. _____
 21. _____
 22. _____
 23. _____
 24. _____
 25. _____

26. TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES (Add lines 18 through 25) **TOTAL: 26. \$** _____

PRESENT NET MONTHLY INCOME (Subtract line 26 from line 17) **27. \$** _____

SECTION II. AVERAGE MONTHLY EXPENSES

A. HOUSEHOLD:

- Mortgage or rent \$ _____
- Property taxes \$ _____
- Utilities \$ _____
- Telephone \$ _____
- Food \$ _____
- Meals outside home \$ _____
- Maintenance/Repairs \$ _____
- Other: _____ \$ _____

E. OTHER EXPENSES NOT LISTED ABOVE

- Clothing \$ _____
- Medical/Dental (uninsured) \$ _____
- Grooming \$ _____
- Entertainment \$ _____
- Gifts \$ _____
- Religious organizations \$ _____
- Miscellaneous \$ _____
- Other: _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

B. AUTOMOBILE

- Gasoline \$ _____
- Repairs \$ _____
- Insurance \$ _____

C. CHILD(REN)'S EXPENSES

- Day care \$ _____
- Lunch money \$ _____
- Clothing \$ _____
- Grooming \$ _____
- Gifts for holidays \$ _____
- Medical/Dental (uninsured) \$ _____
- Other: _____ \$ _____

F. PAYMENTS TO CREDITORS

CREDITOR:	MONTHLY PAYMENT
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

D. INSURANCE

- Medical/Dental \$ _____
- Child/ren's medical/dental \$ _____
- Life \$ _____
- Other: _____ \$ _____

28. TOTAL MONTHLY EXPENSES (add ALL monthly amounts in

A through F above)

28. \$ _____

SUMMARY

29. TOTAL PRESENT MONTHLY NET INCOME

(from line 27 of SECTION I. INCOME)

29. \$ _____

30. TOTAL MONTHLY EXPENSES (from line 28 above)

30. \$ _____

31. SURPLUS (If line 29 is more than line 30, subtract line 30 from line 29.

This is the amount of your surplus. Enter that amount here.)

31. \$ _____

32. (DEFICIT) (If line 30 is more than line 29, subtract line 29 from line 30.

This is the amount of your deficit. Enter that amount here.)

32. (\$ _____)

SECTION III. ASSETS AND LIABILITIES

Use the nonmarital column only if this is a petition for dissolution of marriage and you believe an item is “nonmarital,” meaning it belongs to only one of you and should not be divided. You should indicate to whom you believe the item(s) or debt belongs. (Typically, you will only use this column if property/debt was owned/owed by one spouse before the marriage. See the “General Information for Self-Represented Litigants” found at section 61.075(1), Florida Statutes, for definitions of “marital” and “nonmarital” assets and liabilities.)

A. ASSETS:

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). DO NOT LIST ACCOUNT NUMBERS. ✓ the box next to any asset(s) which you are requesting the judge award to you.	Current Fair Market Value	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/> Cash (on hand)	\$		
<input type="checkbox"/> Cash (in banks or credit unions)			
<input type="checkbox"/> Stocks, Bonds, Notes			
<input type="checkbox"/> Real estate: (Home)			
<input type="checkbox"/> (Other)			
<input type="checkbox"/> Automobiles			
<input type="checkbox"/> Other personal property			
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> ✓ here if additional pages are attached.			
Total Assets (add next column)	\$ _____		

B. LIABILITIES:

DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). DO NOT LIST ACCOUNT NUMBERS. ✓ the box next to any debt(s) for which you believe you should be responsible.	Current Amount Owed	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/> Mortgages on real estate: First mortgage on home	\$		
<input type="checkbox"/> Second mortgage on home			
<input type="checkbox"/> Other mortgages			
<input type="checkbox"/>			
<input type="checkbox"/> Auto loans			
<input type="checkbox"/>			
<input type="checkbox"/> Charge/credit card accounts			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Other			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> ✓ here if additional pages are attached.			
Total Debts (add next column)	\$		

C. CONTINGENT ASSETS AND LIABILITIES:

INSTRUCTIONS: If you have any **POSSIBLE assets** (income potential, accrued vacation or sick leave, bonus, inheritance, etc.) or **POSSIBLE liabilities** (possible lawsuits, future unpaid taxes, contingent tax liabilities, debts assumed by another), you must list them here.

Contingent Assets ✓ the box next to any contingent asset(s) which you are requesting the judge award to you.	Possible Value	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/>	\$		
<input type="checkbox"/>			
Total Contingent Assets	\$		

Contingent Liabilities ✓ the box next to any contingent debt(s) for which you believe you should be responsible.	Possible Amount Owed	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/>	\$		
<input type="checkbox"/>			
Total Contingent Liabilities	\$		

SECTION IV. CHILD SUPPORT GUIDELINES WORKSHEET

(Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet, MUST be filed with the court at or prior to a hearing to establish or modify child support. This requirement cannot be waived by the parties.)

[**one** only]

A Child Support Guidelines Worksheet IS or WILL BE filed in this case. This case involves the establishment or modification of child support.

A Child Support Guidelines Worksheet IS NOT being filed in this case. The establishment or modification of child support is not an issue in this case.

I certify that a copy of this document was [**one** only] () mailed () faxed and mailed () hand delivered to the person(s) listed below on *{date}* _____.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Party

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or deputy clerk.]

Personally known

Produced identification

Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]

I, *{full legal name and trade name of nonlawyer}* _____,

a nonlawyer, located at *{street}* _____, *{city}* _____,

{state} _____, *{phone}* _____, helped *{name}* _____,

who is the [**one** only] ___ petitioner **or** ___ respondent, fill out this form.

**SUMMARY OF ADMINISTRATIVE ORDER 5.1120(E)
ORDER AND NOTICE FOR PARENT EDUCATION
AND FAMILY STABILIZATION COURSE**

This summary has been prepared to help parties involved in certain types of family cases involving children understand what is required of them by the law and the administrative order. A copy of the complete administrative order is available from the Clerk's Office or online at www.circuit8.org , under Circuit Information, then Administrative Orders, then Family.

1. Both parties **must attend a parent education and family stabilization course in the following types of cases:**
 - e. Dissolution of marriage (divorce) where minor children are involved
 - f. Paternity actions involving issues of parental responsibility
 - g. Actions to modify (change) visitation
 - h. Actions to modify (change) primary parental responsibility
2. For dissolution actions, all petitioners required to complete the parenting course must do so within 45 days after filing the petition and all other parties must complete the course within 45 days after service of the petition.
3. For paternity actions, petitioners must complete the course within 45 days after filing the petition and all other parties must complete the course within 45 days after an acknowledgment of paternity by that party, an adjudication of paternity of that party, or an order granting visitation to, or support from, that party.
4. The parties may attend separate courses.
5. The fee for the course is \$40.00 for each person. Either party may request that the Court reduce the fee to \$5.00 based on the party's financial affidavit of indigency.
6. All parties must file a certificate of completion with the court before the entry of the final judgment.
- .

APPROVED PARENTING EDUCATION COURSES IN THE EIGHTH JUDICIAL CIRCUIT

The following are approved courses in the Eighth Judicial Circuit that meet the requirements of section 61.21, Florida Statutes, and Administrative Order No. 5.1120 (D). **PLEASE CALL EACH PROVIDER FOR ADDITIONAL INFORMATION.**

A Positive Divorce Resolution

Classes are held weekly in Gainesville, Monthly in Starke and Macclenny. Call (352) 375-4399 in Gainesville or toll free (888) 747-5362 (24 hour/day 7 days/week).

Class schedules and online registration are available at www.divorce-resolution.com.

In The Best Interest Of Children And Family

When Parents are No Longer a Couple

Courses are offered twice monthly: Tuesdays 6:00PM to 10:00PM & Saturdays 9:00AM to 1:00PM.

Gainesville Family Institute, 1031 NW 6th Street, Bldg. C, Gainesville, FL 32601

Phone: (352) 376-5543 Fax: (352) 376-2042

Parents, Children And Divorce

Offering classes throughout the Eighth Judicial Circuit as well as most counties in the State of Florida.

Classes are offered evenings and Saturday mornings. Web Site: www.educationprograms.com

E-mail: pcd@educationprograms.com Phone: (800) 767-8193

Parent Education And Family Stabilization Course

Alliance for Better Co-Parenting, Inc.

Alachua County, 2nd and 4th Thursday (6:00 pm) and 2nd and 4th Saturday (1:00 pm) of each month.

Satellite Offices: (Bradford, Levy and Union Counties): call (866) 632-7296 for location and schedule.

Main Office - 4509 NW 23rd Ave., Suite 4, Gainesville, FL 32606

Phone: (352) 379-4665 Fax: (352) 377-0002

email contact: (for Info/Class Schedule) mentalhealth@prodigy.net

List of Approved Web-Based Courses

www.parentingchoice.com

www.onlinedivorceprogram.com

www.divorce-resolution.com

www.floridaparentingcourse.com

www.floridaparenting.com

www.floridadivorceeducation.com

NOTE: Online courses will be accepted upon showing a special need, such as disability, military service, or residence in a State where such a course is not available.

SECTION “B”

This section is to be used when you are going to have the other party in your case served by the Sheriff’s Office. The petitioner will have to fill out the forms in section “A” and file them with the clerk’s office at the Courthouse. Take a copy of the forms you have filed and the following SHERIFF’S FORMS from section “B”:

- Directions for Memorandum to Sheriff
- Memorandum to Sheriff
- Affidavit for Personal Service Outside the State of Florida (used when the other party resides in another State). **Failure to use this document can result in the Sheriff’s service being invalid.**
- Summons

Contact the Sheriff’s Office where the other party resides to find out what they require of you. Deliver or mail a complete copy of what you have filed and the Sheriff’s forms, including any fees, and envelopes. On serving these papers on the other party the Sheriff’s Office will send you a “Notice of Service” which is proof that the other party was served. When the twenty (20) day time line has expired and the other party has not filed a response you can file the following DEFAULT PAPERS:

- Motion for Default
- Notice That Action is at Issue and Motion for Hearing/Non-Jury Trial
(follow the instructions provided with the above form)

DIRECTIONS FOR SERVICE OF PROCESS MEMORANDUM TO SHERIFF

This form should be sent to the sheriff's department in the county of the state where you wish to have the Respondent served.

With this form you can inform the sheriff's department of the best times to find the Respondent at work and/or home. (You may also include a map to the Respondent's home or work place to help the sheriff find the Respondent and deliver the summons.)

IT IS SUGGESTED THAT YOU:

1. Contact the Sheriff of that county and get the following information:

- Their address
- Cost of service
- Whether they will take a check or money order.
- Anything else they may require for service of process.

2. Mail or Deliver to the Sheriff:

- a) Memorandum to Sheriff
- b) Original Summons
- c) Set of photocopies of all the papers that you filed
- d) Self-addressed, stamped envelope.

The self-addressed, stamped envelope is for the Sheriff to mail you the original Return of Service. **

**UPON RECEIVING THE RETURN OF SERVICE, DELIVER IT OR MAIL IT TO THE
CLERK OF COURT IN THE COUNTY WHERE YOU FILED!

Pay attention to the date the Return of Service says the respondent was served with the summons. Remember, the Respondent is required to file a written response to your petition within 20 days from the day after being served.

SERVICE OF PROCESS MEMORANDUM TO SHERIFF

TO: Sheriff of _____ County, _____, Civil Division
State of _____

RE: _____, Petitioner vs.
_____, Respondent.

In the Circuit Court, County of _____, Florida
Case Number: _____

DATE: _____

Enclosed you will find a check or money order for the fee for service of process along with the summons and petition to be served on the respondent.

Respondent: _____

Residence Address: _____

Work Address: _____

SPECIAL INSTRUCTIONS for locating the Respondent:

Please use the enclosed self-addressed stamped envelope to send the Affidavit for Return of Service. Thank you for your time.

Petitioner's Signature

Printed Name: _____

Petitioner's Address: _____

Telephone No.: () _____

**AFFIDAVIT FOR PERSONAL SERVICE OUTSIDE
THE STATE OF FLORIDA**
Sections 48.193 and 48.194, Fla. Stat.

STATE OF _____
COUNTY OF _____

BEFORE ME, this day personally appeared _____, who being duly sworn, deposes and says that the following information is true and correct according to his/her best knowledge and belief:

Respondent _____ is subject to the jurisdiction of the Courts of Florida, and to personal service of process outside the state of Florida, for a cause of action arising out of the following: (check one or more)

_____ With respect to a proceeding for alimony, child support, and/or property division in connection with a dissolution of marriage while maintaining a marital domicile in Florida or if the defendant resided in Florida before the commencement of the action, whether cohabitating during that time or not.

_____ With respect to a proceeding for support for dependant(s) in an independent action while maintaining a marital domicile in Florida or if the defendant resided in Florida before commencement of the action, whether cohabitating during that time or not.

_____ With respect to paternity actions when the father had sexual intercourse in Florida from which the child could have been conceived.

Petitioner's Signature
Printed name _____

Address _____

City _____ State _____ Zip _____

Telephone (area code and number)

Sworn to and subscribed before me on _____, 20____
by {name} _____ who is _____ Personally known **OR**
_____ Produced identification. Type of identification produced _____

NOTARY PUBLIC—STATE OF FLORIDA

NOTE: Service of process on persons outside Florida must be made in the same manner as service in Florida by any officer authorized to serve process in the state where the person is served. **AN AFFIDAVIT OF THE OFFICER SHALL BE FILED STATING THE TIME, MANNER, AND PLACE OF THE SERVICE.**

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.910(a),
SUMMONS: PERSONAL SERVICE ON AN INDIVIDUAL

When should this form be used?

This form should be used to obtain **personal service** on the other **party** when you begin your lawsuit. **Service** is required for **all** documents filed in your case. Service means giving a copy of the required papers to the other party using the procedure that the law requires. Generally, there are two ways to make service: (1) personal service, or (2) service by mail or hand delivery. A third method for service is called **constructive service**; however, the relief a court may grant may be limited in a case where constructive service has been used.



The law requires that certain documents be served by **personal service** if personal service is possible. **Personal service** means that a summons (this form) and a copy of the forms you are filing with the court that must be personally served are delivered by a deputy sheriff or private process server



- directly to the other party, **or**
- to someone over the age of fifteen with whom the other party lives.

Personal service is required for **all petitions**, including petitions for modification. You cannot serve these papers on the other party yourself or by mail or hand delivery. Personal service must be made by the sheriff's department in the county where the other party lives or works or by a private process server certified in the county where the other party lives or works.



In many counties, there are private process servers who, for a fee, will personally serve the summons and other documents that require personal service. You should look under "**process servers**" in the yellow pages of the telephone book for a list of private process servers in your area. You may use a private process server to serve any paper required to be personally served in a family law case **except** a petition for injunction for protection against domestic or repeat violence.



How do I start?



When you begin your lawsuit, you need to complete this form (summons) and a **Process Service Memorandum**,   Florida Supreme Court Approved Family Law Form 12.910(b). The forms should be typed or printed legibly in black ink. Next, you will need to take these forms and, if you have not already done so, **file** your petition with the **clerk of the circuit court** in the county where you live. You should keep a copy of the forms for your records. The clerk will sign the summons, and then the summons, a copy of the papers to be served, and the process service memorandum must be delivered to the appropriate sheriff's office or to a private process server for service on the other party.

IF THE OTHER PARTY LIVES IN THE COUNTY WHERE SUIT IS FILED: Ask the clerk in your county about any local procedures regarding service. Generally, if the other party lives in the county in which you are filing suit and you want the sheriff's department to serve the papers, you will file the summons along with a **Process Service Memorandum**,   Florida Supreme Court Approved Family Law Form 12.910(b), with the clerk and the clerk will forward those papers to the sheriff for service. Make sure that you attach a copy of the papers you want personally served to the summons. You may also need to provide the sheriff with a stamped envelope addressed to you. This will allow the sheriff to send the proof of service to you, after the sheriff serves your papers on the other party. However, in some counties the sheriff may send the proof of service directly to the clerk. If you are instructed to supply a self-addressed, stamped envelope and you receive the proof of service, you should file the proof of service with the clerk after you receive it from the sheriff. Also, you will need to find out how much the sheriff charges to serve the papers. Personal checks are not accepted. You should attach to the summons a cashier's check or money order made payable to the sheriff, and either give it to the clerk for delivery to

the sheriff or send all of the paperwork and the fee to the sheriff yourself. The clerk will tell you which procedure to use. The costs for service may be waived if you are indigent.

If you want a private process server to serve the other party, you should still bring the summons to the clerk's office and have the clerk sign it for you. You should deliver the summons, along with the copy of your initial petition and any other papers to be served, and a **Process Service Memorandum**,   Florida Supreme Court Approved Family Law Form 12.910(b), to the private process server. The private process server will charge you a fee for serving the papers. After service is complete, proof of service by the private process server must be filed with the clerk. You should discuss how this will occur with the private process server.

IF THE OTHER PARTY LIVES IN ANOTHER COUNTY: If the other party lives in another county, service needs to be made by a sheriff in the county where the other party lives or by a private process server certified in the county where the other party lives. Make sure that you attach a copy of the papers you want personally served to the summons as well as the **Process Service Memorandum**,   Florida Supreme Court Approved Family Law Form 12.910(b). If you want the sheriff to serve the papers, the clerk may send your papers to that sheriff's office for you, or you may have to send the papers yourself. The clerk will tell you which procedure to use. Either way, you will need to provide the sheriff with a stamped envelope addressed to you. This will allow the sheriff to send the proof of service to you, after the sheriff serves your papers on the other party. You should file the proof of service with the clerk after you receive it from the sheriff. Also, you will need to find out how much the sheriff charges to serve the papers. Personal checks are not accepted. You should attach to the summons a cashier's check or money order made payable to the sheriff, and either give it to the clerk for delivery to the sheriff or send all of the paperwork and the fee to the sheriff yourself. The clerk will tell you which procedure to use. The costs for service may be waived if you are indigent.

If you want a private process server to serve the other party, you should still bring the summons to the clerk's office where the clerk will sign it for you. You should deliver the summons, along with the copy of your initial petition and any other papers to be served, and a **Process Service Memorandum**,   Florida Supreme Court Approved Family Law Form 12.910(b), to the private process server. The private process server will charge you a fee for serving the papers. After service is complete, proof of service by the private process server must be filed with the clerk. You should discuss how this will occur with the private process server.

IF THE OTHER PARTY CANNOT BE LOCATED OR DOES NOT LIVE IN FLORIDA: If, after you have made a diligent effort to locate the other party, you absolutely cannot locate the other party, you may serve the other party by publication. Service by publication is also known as **constructive service**. You may also be able to use constructive service if the other party does not live in Florida. **However, Florida courts have only limited jurisdiction over a party who is served by constructive service and may have only limited jurisdiction over a party living outside of Florida regardless of whether that party is served by constructive or personal service;** that is, the judge's power to order the other party to do certain things may be limited. For example, the judge may be able to grant your request for a divorce, but the judge may not be able to address issues such as child support, spousal support (alimony), or division of property or debts.



Regardless of the type of service used, if the other party once lived in Florida but is living outside of Florida now, you should include in your petition a statement regarding the length of time the party lived in Florida, if any, and when. For example: "Respondent last lived in Florida from *{date}* _____ to *{date}* _____."

This area of the law is very complex and you may need to consult with an attorney regarding the proper type of service to be used in your case if the other party does not live in Florida or cannot be located.

What happens when the papers are served on the other party?



The date and hour of service are written on the original summons and on all copies of it by the person making the service. The person who delivers the summons and copies of the petition must file a proof of service with the clerk or provide a proof of service to you for filing with the court. **It is your responsibility to make sure the proof of service has been returned to the clerk and placed in your case file.**


Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). For further information regarding service of process, see chapters 48 and 49, Florida Statutes, and rule 1.070, Florida Rules of Civil Procedure, as well as the instructions for **Notice of Action for Dissolution of Marriage**,  Florida Supreme Court Approved Family Law Form 12.913(a), and **Affidavit of Diligent Service and Inquiry**,  Florida Family Law Rules of Procedure Form 12.913(b).

Special notes...

If you have been unable to obtain proper service on the other party within **120 days** after filing your lawsuit, the court will dismiss your lawsuit against the other party unless you can show the court a good reason why service was not made within **120 days**. For this reason, if you had the local sheriff serve the papers, you should check with the clerk every couple of weeks after completing the service papers to see if service has been completed. You may need to supply the sheriff with a new or better address. If you had a private process server or a sheriff in another county serve the papers, you should be in contact with that person or sheriff until you receive proof of service from that person or sheriff. You should then file the proof of service with the clerk immediately.

If the other party fails to respond, i.e., fails to file a written response with the court, within **20 days** after the service of the summons, you are entitled to request a **default**. See the instructions to **Motion for Default**,  Florida Supreme Court Approved Family Law Form 12.922 (a), and **Default**, Florida Supreme Court Approved Family Law Form 12.922(b), for further information. You will need to file a **Nonmilitary Affidavit**,  Florida Supreme Court Approved Family Law Form 12.912(b), before a default may be granted.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,

and

Respondent.

**SUMMONS: PERSONAL SERVICE ON AN INDIVIDUAL
ORDEN DE COMPARECENCIA: SERVICIO PERSONAL EN UN INDIVIDUO
CITATION: L'ASSIGNATION PERSONAL SUR UN INDIVIDUEL**

TO/PARA/A: *{enter other party's full legal name}* _____,
{address(including city and state)/location for service} _____.

IMPORTANT


A lawsuit has been filed against you. You have **20 calendar days** after this summons is served on you to file a written response to the attached complaint/petition with the clerk of this circuit court, located at: *{street address}* _____. A phone call will not protect you. Your written response, including the case number given above and the names of the parties, must be **filed** if you want the Court to hear your side of the case.

If you do not file your written response on time, you may lose the case, and your wages, money, and property may be taken thereafter without further warning from the Court. There are other legal requirements. You may want to call an attorney right away. If you do not know an attorney, you may call an attorney referral service or a legal aid office (listed in the phone book).

If you choose to file a written response yourself, at the same time you file your written response to the Court, you must also mail or take a copy of your written response to the party serving this summons at:

{Name and address of party serving summons} _____

Copies of all court documents in this case, including orders, are available at the Clerk of the Circuit Court's office. You may review these documents, upon request.

You must keep the Clerk of the Circuit Court's office notified of your current address. (You may file Notice of Current Address,  Florida Supreme Court Approved Family Law Form 12.915.) Future papers in this lawsuit will be mailed to the address on record at the clerk's office.

WARNING: Rule 12.285, Florida Family Law Rules of Procedure, requires certain automatic disclosure of documents and information. Failure to comply can result in sanctions, including dismissal or striking of pleadings.

IMPORTANTE


Usted ha sido demandado legalmente. Tiene veinte (20) días, contados a partir del recibo de esta notificación, para contestar la demanda adjunta, por escrito, y presentarla ante este tribunal. Localizado en: _____ . Una llamada telefónica no lo protegerá. Si usted desea que el tribunal considere su defensa, debe presentar su respuesta por escrito, incluyendo el número del caso y los nombres de las partes interesadas. Si usted no contesta la demanda a tiempo, pudiese perder el caso y podría ser despojado de sus ingresos y propiedades, o privado de sus derechos, sin previo aviso del tribunal. Existen otros requisitos legales. Si lo desea, usted puede consultar a un abogado inmediatamente. Si no conoce a un abogado, puede llamar a una de las oficinas de asistencia legal que aparecen en la guía telefónica.

Si desea responder a la demanda por su cuenta, al mismo tiempo en que presente su respuesta ante el tribunal, usted debe enviar por correo o entregar una copia de su respuesta a la persona denominada abajo.

Si usted elige presentar personalmente una respuesta por escrito, en el mismo momento que usted presente su respuesta por escrito al Tribunal, usted debe enviar por correo o llevar una copia de su respuesta por escrito a la parte entregando esta orden de comparecencia a:

Nombre y dirección de la parte que entrega la orden de comparecencia: _____

Copias de todos los documentos judiciales de este caso, incluyendo las ordenes, están disponibles en la oficina del Secretario de Juzgado del Circuito [Clerk of the Circuit Court's office]. Estos documentos pueden ser revisados a su solicitud.

Usted debe de mantener informada a la oficina del Secretario de Juzgado del Circuito de su dirección actual. (Usted puede presentar _____ el Formulario: Ley de Familia de la Florida 12.915, [ Florida Supreme Court Approved Family Law Form 12.915], Notificación de la Dirección Actual [Notice of Current Address].) Los papeles que se presenten en el futuro en esta demanda judicial serán enviados por correo a la dirección que este registrada en la oficina del Secretario.

ADVERTENCIA: Regla 12.285 (Rule 12.285), de las Reglas de Procedimiento de Ley de Familia de la Florida [Florida Family Law Rules of Procedure], requiere cierta revelación automática de documentos e información. El incumplimiento, puede resultar en sanciones, incluyendo la desestimación o anulación de los alegatos.

IMPORTANT


Des poursuites judiciaires ont été entreprises contre vous. Vous avez 20 jours consécutifs à partir de la date de l'assignation de cette citation pour déposer une réponse écrite à la plainte ci-jointe auprès de ce tribunal. Qui se trouve à: {L'Adresse} _____. Un simple coup de téléphone est insuffisant pour vous protéger; vous êtes obligés de déposer votre réponse écrite, avec mention du numéro de dossier ci-dessus et du nom des parties nommées ici, si vous souhaitez que le tribunal entende votre cause. Si vous ne déposez pas votre réponse écrite dans le délai requis, vous risquez de perdre la cause ainsi que votre

salaire, votre argent, et vos biens peuvent etre saisis par la suite, sans aucun preavis ulterieur du tribunal. Il y a d'autres obligations juridiques et vous pouvez requerir les services immediats d'un avocat. Si vous ne connaissez pas d'avocat, vous pourriez telephoner a un service de reference d'avocats ou a un bureau d'assistance juridique (figurant a l'annuaire de telephones).

Si vous choisissez de déposer vous-meme une reponse ecrite, il vous faudra egalement, en meme temps que cette formalite, faire parvenir ou expedier une copie au carbone ou une photocopie de votre reponse ecrite a la partie qui vous depose cette citation.

Nom et adresse de la partie qui depose cette citation: _____

Les photocopies de tous les documents tribunaux de cette cause, y compris des arrêts, sont disponible au bureau du greffier. Vous pouvez revue ces documents, sur demande.

Il faut aviser le greffier de votre adresse actuelle. (Vous pouvez déposer  Florida Supreme Court Approved Family Law Form 12.915, Notice of Current Address.) Les documents de l'avenir de ce proces seront envoyer a l' adresse que vous donnez au bureau du greffier.

ATTENTION: La regle 12.285 des regles de procedure du droit de la famille de la Floride exige que l'on remette certains renseignements et certains documents `a la partie adverse. Tout refus de les fournir pourra donner lieu a des sanctions, y compris le rejet ou la suppression d'un ou de plusieurs actes de procedure.

THE STATE OF FLORIDA

TO EACH SHERIFF OF THE STATE: You are commanded to serve this summons and a copy of the complaint in this lawsuit on the above-named person.

DATED: _____

CLERK OF THE CIRCUIT COURT

(SEAL)

By: _____
Deputy Clerk

INSTRUCTIONS FOR FLORIDA FAMILY LAW FORM

REQUEST TO ENTER DEFAULT/DEFAULT
(COMBINED FORM)

If the other party has failed to file or serve any documents on you in response to your lawsuit as required, and the other party was properly served (i.e., by process, or by publication, etc.), you may ask the Clerk of the Court to enter a default against that person by completing this form and filing it with the clerk.

STEP 1:

First you must determine how the other party was served:

- The other party was **served by Process (summons)**: Generally, the other party has 20 days to respond to your petition.
- The other party was **served by Publication or Posting**: The Notice of Action that was posted or published contains the date by which the other party must respond to your petition (between 30 - 90 days).

STEP 2:

You must provide to the Clerk one of the following documents to prove that the other party has defaulted (failed to respond to your petition within the prescribed time period):

- the original Sheriff's Affidavit for Return of Service—**if served by process**
- or**
- the Editor's Certificate of Publication—**if served by publication**
- or**
- the Clerk's Certificate of Posting—**if served by posting**

STEP 3:

Once the default is entered against the other party by the Clerk of Court, you may request that your case be set for trial.

- You will need to fill out the **top portion** of the **NOTICE THAT ACTION IS AT ISSUE** and your **address on the second page**
- Make **three copies** of the request.
- File the **original** Notice with the Clerk of the Circuit Court.
- A copy of the form must be sent by mail to the opposing party.
- Bring a copy of the **NOTICE THAT ACTION IS AT ISSUE** and two stamped business size #10 envelopes to room 400 to be placed in the Case Manager's "In" box. Have one of the envelopes addressed to yourself and the other addressed to the opposing party.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

Petitioner,

CASE NO: _____
DIVISION: _____

vs.

Respondent.

MOTION/REQUEST TO ENTER DEFAULT

TO THE CLERK OF COURT: Please enter a default against the Respondent who has failed to respond to the petition.

DATED: _____

Signature

Name _____

Address _____

DEFAULT

A default is entered in this action against the Respondent for failure to serve or file a response or any paper as is required by law.

DATED: _____

J.K. "BUDDY" IRBY
CLERK OF CIRCUIT COURT

By: _____
Deputy Clerk

SECTION C

This section is to be used when you do not know the location of the other party in your case. The petitioner will have to fill out the forms in section “A” and file them with the Clerk’s office at the Family/Civil Justice Center. Make at least two copies for yourself. After this step then you can complete the following forms:

CONSTRUCTIVE SERVICE FORMS

-Affidavit of Diligent Search and Inquiry

Additional local forms to support the affidavit of diligent search include:

- U.S. Postal Service Request for Change of Address
- Request for Information from Driver License Records
- Gainesville Police Department Public Record Request

-Memorandum for Certificate of Military Service (follow the instructions) **OR**

-Nonmilitary Affidavit

-Notice of Action (publish for four consecutive weeks in a newspaper)

After you have completed the Affidavit of Diligent Search and Inquiry bring the above forms back to the clerk’s office to file. Place one of the copies of the forms you have already filed in a large postage paid envelope. Address the envelope to the last known address of the respondent and leave it with the Clerk’s office. You must now publish for four consecutive weeks in a newspaper in the county where your case was filed. When the publishing period has ended you can file the forms below.

DEFAULT

-Motion for Default and Default—use forms provided in Section B

-Notice That Action is at Issue and Motion for Hearing/Non-Jury Trial (follow the instructions provided with the above form)

Special Notes...

If the other party fails to respond to your **petition** within the time limit stated in the notice of action that is published or posed, you are entitled to request a **default**. (See **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a), and **Default** Florida Supreme Court Approved Family Law Form 12.922(b).)


Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.913(b),
AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY

When should this form be used?

This form is to be used with **Notice of Action for Dissolution of Marriage**,  Florida Supreme Court Approved Family Law Form 12.913(a), to obtain **constructive service** (also called service by publication) in a **dissolution of marriage** case.


This form includes a checklist of places you can look for information on the location of your spouse. While you do not have to look in all of these places, the court must believe that you have made a very serious effort to get information about your spouse's location and that you have followed up on any information you received.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public** or **deputy clerk**. You should **file** the original and a **Notice of Action for Dissolution of Marriage**,  Florida Supreme Court Approved Family Law Form 12.913(a), with the **clerk of the circuit court** in the county where your petition for dissolution of marriage is filed. You should keep a copy for your records.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). For further information, see rule 12.070, Florida Family Law Rules of Procedure and rule 1.070(e) and (f), Florida Rules of Civil Procedure.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner,

and


Respondent.

AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY

I, *{full legal name}* _____, being sworn, certify that the following information is true:

1. I have made diligent search and inquiry to discover the name and current residence of Respondent: *{Specify details of search}* **Refer to checklist below and identify all actions taken (any additional information included such as the date the action was taken and the person with whom you spoke is helpful) (attach additional sheet if necessary):**

[all that apply]

- United States Post Office inquiry through Freedom of Information Act for current address or any relocations.
- Last known employment of Respondent, including name and address of employer. You should also ask for any addresses to which W-2 Forms were mailed, and, if a pension or profit-sharing plan exists, then for any addresses to which any pension or plan payment is and/or has been mailed.
- Unions from which Respondent may have worked or that governed particular trade or craft.
- Regulatory agencies, including professional or occupational licensing.
- Names and addresses of relatives and contacts with those relatives, and inquiry as to Respondent's last known address. You are to follow up any leads of any addresses where Respondent may have moved. Relatives include, but are not limited to: parents, brothers, sisters, aunts, uncles, cousins, nieces, nephews, grandparents, great-grandparents, former in-laws, stepparents, stepchildren.
- Information about the Respondent's possible death and, if dead, the date and location of the death.
- Telephone listings in the last known locations of Respondent's residence.
- Internet at <http://www.switchboard.com> or other Internet people finder or the library checked for me.
- Law enforcement arrest and/or criminal records in the last known residential area of Respondent.
- Highway Patrol records in the state of Respondent's last known address.
- Department of Motor Vehicle records in the state of Respondent's last known address.
- Department of Corrections records in the state of Respondent's last known address.
- Title IV-D (child support enforcement) agency records in the state of Respondent's last known address.
- Hospitals in the last known area of Respondent's residence.
- Utility companies, which include water, sewer, cable TV, and electric, in the last known area of Respondent's residence.
- Letters to the Armed Forces of the U.S. and their response as to whether or not there is any information about Respondent. (See Memorandum for Certificate of Military Service,  Florida Supreme Court Approved Family Law Form 12.912(a).)
- Tax Assessor's and Tax Collector's Office in the area where Respondent last resided.

____ Other: *{explain}* _____

2. The age of Respondent is [**one** only] () known *{enter age}* _____ **or** () unknown.

3. **Respondent's current residence**

[**one** only]

____ a. Respondent's current residence is unknown to me.

____ b. Respondent's current residence is in some state or country other than Florida, and Respondent's last known address is: _____

____ c. The Respondent, having residence in Florida, has been absent from Florida for more than 60 days prior to the date of this affidavit, or conceals him(her)self so that process cannot be served personally upon him or her, and I believe there is no person in the state upon whom service of process would bind this absent or concealed Respondent.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Petitioner
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]


____ Personally known
____ Produced identification
____ Type of identification produced

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]

I, *{full legal name and trade name of nonlawyer}* _____,
a nonlawyer, located at *{street}* _____, *{city}* _____,
{state} _____, *{phone}* _____, helped *{name}* _____
who is the petitioner, fill out this form.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM
12.912(a),
MEMORANDUM FOR CERTIFICATE OF MILITARY SERVICE

When should this form be used?

This form should be used if you **DO NOT KNOW** whether the other party in your case is on active duty in a branch of the military service of the United States. Fill out this form and **mail one copy to each** of the military offices at the addresses on the form. You may be charged a service fee by each military service branch for their response. To assist you in determining the amount of each military branch's fee, phone numbers are listed below. You will need to call each number to find out their fee for this search. Even if you believe that the other party **has never** or **would never** join the military, you must show the court proof that he or she is not a member of the military. Therefore, you may need to use this form to provide the court with such proof. See the instructions for the **Nonmilitary Affidavit**,  Florida Supreme Court Approved Family Law Form 12.912(b), for additional information.

COAST GUARD: U.S. Coast Guard Commander (CGPC-ADM-3), Coast Guard Personnel Command, 2100 2nd St., S.W., Room 1616, Washington, D. C. 20593, Phone: (202) 267-1340


AIR FORCE: AFPC MSIMDL, 550 C Street, W., Suite 50, Randolph AFB, TX 78150-4752, Phone: (210) 652-5775

NAVY: BUPERS, PERS 02116, 2 Navy Annex, Washington, D. C. 20370-0216, Phone: (703) 614-5011 or (703) 614-9221


MARINE CORPS: USMC-CMC, HQMC-MMSB-10, 2008 Elliot Road, Room 201, Quantico, VA 22134-5030, Phone: (703) 784-3941

PUBLIC HEALTH SERVICE: Surgeon General, U.S. Public Health Service, Div. of Comm., Off. Personnel, 5600 Fishers Lane, Room 4-21, Rockville, MD 20857, Phone: (301) 594-2963

ARMY: Army World Wide Locator, U.S. Army Enlisted Records and Evaluation Center, 8899 East 56th Street, Indianapolis, IN 46249-5301, Phone: (703) 325-3732

This form should be typed or printed in black ink. You should complete this form for each branch of the United States' military listed above, and mail the form to each branch with a **check for the appropriate amount and a stamped, self-addressed envelope**. You should keep a copy of the form for your records. After you have received a verification of nonmilitary status from each branch, you will need to attach those verifications to a **Nonmilitary Affidavit**,  Florida Supreme Court Approved Family Law Form 12.912(b), for filing with the clerk.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
 IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

 Petitioner,

Division: _____

and

 Respondent.

MEMORANDUM FOR CERTIFICATE OF MILITARY SERVICE

- TO:** () U.S. Coast Guard Commander (CGPC-ADM-3), Coast Guard Personnel Command, 2100 2nd St., S.W., Room 1616, Washington, D. C. 20593
 () AFPC MSIMDL, 550 C Street, W., Suite 50, Randolph AFB, TX 78150-4752
 () BUPERS, PERS 02116, 2 Navy Annex, Washington, D. C. 20370-0216
 () USMC-CMC, HQMC-MMSB-10, 2008 Elliot Road, Room 201, Quantico, VA 22134-5030
 () Surgeon General, U.S. Public Health Service, Div. of Comm., Off. Personnel, 5600 Fishers Lane, Room 4-21, Rockville, MD 20857
 () Army World Wide Locator, U.S. Army Enlisted Records and Evaluation Center, 8899 East 56th Street, Indianapolis, IN 46249-5301

RE: _____
 {Name of Respondent}

 {Respondent's Social Security Number}

This case involves a family matter. It is imperative that a determination be made whether the above-named individual, who has an interest in these proceedings, is presently in the military service of the United States, and the dates of induction and discharge, if any. This information is requested under section 581 of the Soldiers' and Sailors' Civil Relief Act of 1940, as amended. Please supply a verification as soon as possible. My check for \$_____ for your search fee and a self-addressed, stamped envelope are enclosed.

Dated: _____

Signature of Petitioner

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [✎ fill in all blanks]


I, {full legal name and trade name of nonlawyer} _____,
 a nonlawyer, located at {street} _____, {city} _____,
 {state} _____, {phone} _____, helped {name} _____
 who is the petitioner, fill out this form.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM
12.912(b),
NONMILITARY AFFIDAVIT


When should this form be used?

You should use this form when ALL of the following statements are true:

- The other person in your case has been served, whether by **personal service** or **constructive service**.
- The other person in your case has not responded to your petition.
- You are requesting that the court enter a **default** judgment against the other person.
- You **ABSOLUTELY KNOW FOR CERTAIN** that the other person is **NOT** in the military service.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public** or **deputy clerk**. You must **file** the original of this form with the **clerk of the circuit court** when you file your **Motion for Default**,  Florida Supreme Court Approved Family Law Form 12.922(a). You must also attach copies of all verifications of nonmilitary service that you received from each branch of the United States' military service. You should keep a copy for your records.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**,  Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,
and

Respondent.

NONMILITARY AFFIDAVIT

I, {full legal name} _____, being sworn, certify that the following information is true:

[all that apply]

- _____ 1. I know of my own personal knowledge that Respondent is not on active duty in the armed services of the United States.
- _____ 2. I have inquired of the armed services of the United States and the U.S. Public Health Service to determine whether the Respondent is a member of the armed services and am attaching certificates stating that Respondent is not now in the armed services.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

DATED: _____

Signature of Petitioner
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

- _____ Personally known
- _____ Produced identification. Type of identification produced _____.

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in all blanks]

I, {full legal name and trade name of nonlawyer} _____,
a nonlawyer, located at {street} _____, {city} _____,
{state} _____, {phone} _____, helped {name} _____,
who is the petitioner, fill out this form.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.913(a),
NOTICE OF ACTION FOR DISSOLUTION OF MARRIAGE

When should this form be used?

This form may be used to obtain **constructive service** (also called service by publication) in a **dissolution of marriage** case if you do not know where your **spouse** lives or if your spouse lives outside Florida and you are unable to obtain **personal service**. However, if you use constructive service, the court may grant only limited relief because its jurisdiction is limited. For example, the court can grant your divorce but cannot decide issues of **child support**, spousal support (**alimony**), or division of property or debts. This is a complicated area of the law and you may wish to consult an attorney before using constructive service.

You should complete this form by typing or printing the appropriate information in black ink. You should insert your spouse's name and last known address and then **file** this form with the **clerk of the circuit court** in the county where your petition for dissolution of marriage was filed. You must also complete and file an **Affidavit of Diligent Search and Inquiry**, Florida Family Law Rules of Procedure Form 12.913(b). You should keep a copy for your records.

After the **Affidavit of Diligent Search and Inquiry**, Florida Family Law Rules of Procedure Form 12.913(b), is filed, the clerk will sign this form. The form must then be given to a qualified local newspaper to be published for four consecutive weeks. When in doubt, ask the clerk which newspapers in your area are "qualified." The newspaper will charge you for this service. If you cannot afford to pay the cost of publication of this notice in a qualified newspaper, you may ask the clerk to post the notice at a place designated for such postings. You will need to file an **Application for Determination of Civil Indigent Status**, which you can obtain from the clerk. If the clerk determines that you cannot afford these costs, the clerk will post the notice of action. In Dade, Broward, and Duval counties, you may ask the clerk to publish your notice without charge.

Where can I look for more information?

Before proceeding, you should read "General Information for Self-Represented Litigants" found at <http://www.flcourts.org> (choose Florida State Courts, select Self Help from the menu, then select Family Forms). For further information, see rule 12.070, Florida Family Law Rules of Procedure, and rule 1.070, Florida Rules of Civil Procedure.

Special notes...

If the other party fails to respond to your **petition** within the time limit stated in the notice of action that is published or posted, you are entitled to request a **default**. (See **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a), and **Default**, Florida Supreme Court Approved Family Law Form 12.922(b).)

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner

and

Respondent.

NOTICE OF ACTION FOR DISSOLUTION OF MARRIAGE

TO: *{name of Respondent}* _____
{Respondent's last known address} _____

YOU ARE NOTIFIED that an action has been filed against you and that you are required to serve a copy of your written defenses, if any, to it on *{name of Petitioner}* _____, whose address is _____ on or before *{date}* _____, and file the original with the clerk of this Court at *{clerk's address}* _____

before service on Petitioner or immediately thereafter. **If you fail to do so, a default may be entered against you for the relief demanded in the petition.**

Copies of all court documents in this case, including orders, are available at the Clerk of the Circuit Court's office. You may review these documents upon request.

You must keep the Clerk of the Circuit Court's office notified of your current address. (You may file Notice of Current Address, Florida Supreme Court Approved Family Law Form 12.915.) Future papers in this lawsuit will be mailed to the address on record at the clerk's office.

WARNING: Rule 12.285, Florida Family Law Rules of Procedure, requires certain automatic disclosure of documents and information. Failure to comply can result in sanctions, including dismissal or striking of pleadings.

Dated: _____.

J. K. "BUDDY" IRBY
CLERK OF THE CIRCUIT COURT

By: _____
Deputy Clerk

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in all blanks]

I, *{full legal name and trade name of nonlawyer}* _____, a nonlawyer, located at *{street}* _____, *{city}* _____, *{state}* _____, *{phone}* _____, helped *{name}* _____ who is the petitioner, fill out this form.

Requesting a Hearing/Non-Jury Trial in a Family Court Case in Alachua County, Florida

DO NOT SUBMIT THE NOTICE THAT ACTION IS AT ISSUE.

Until:

1. *All the appropriate forms or documents have been filed to include financial affidavits, child support worksheet, parenting stabilization course, etc.*
2. *You have filed Proof of Service of Process Or Proof of Publication AND the Clerk has entered a default.*
3. *Or the Respondent has filed a response or an Answer and Waiver.*
4. *AND Mediation (352) 491-4417 has been completed if necessary.*

You will use the combined form titled “*Notice that Action is at Issue and Request for a Hearing/Non-Jury Trial*” to request a Hearing/Non-Jury Trial on your motion or petition. If you do so before the above has taken place a Hearing/Non-Jury Trial will **not** be scheduled.

Fill in the following information:

- Parties’ names (Petitioner and Respondent)
- Case number and Division
- Your name (Comes Now _____)
- Amount of time you think necessary for the judge to hear all the issues in your case. If your case has no disputed issues, it may take only ten minutes.
- Today’s date
- Your signature (no Notary needed)
- The Respondent’s name and address

Make 2 copies of the original:

- File the original with the clerk’s office.
- Mail or hand deliver one copy to the Respondent.

•Mail or hand deliver one copy to the **Case Manager in Room 400** (Family Courts) in the Alachua County Family/Civil Justice Center along with 2 stamped business size envelopes, one addressed to you and the other addressed to the Respondent. You may submit these items by mail to the Case Manager at the Alachua County Family/Civil Justice Center, 201 E. University Avenue, Room 400, Gainesville, FL 32601.

In about **three weeks**, you should receive a response from the judge’s office. If not, you may call Family Courts at (352) 374-3694 to ask about the status of your request for a court hearing.

IN THE CIRCUIT COURT, EIGHTH JUDICIAL CIRCUIT,
IN AND FOR ALACHUA COUNTY, FLORIDA

Petitioner,

CASE NO.: _____

and

DIVISION: _____

Respondent.

NOTICE THAT ACTION IS AT ISSUE AND REQUEST FOR HEARING/NON-JURY TRIAL

COMES NOW _____, and shows that this action is at issue and ready for a hearing/non-jury trial. The hearing/trial is on the original action. It is estimated that the trial will require _____ minutes. Therefore, the undersigned requests the court schedule a hearing/non-jury trial in this action.

Dated: _____
(today's date)

YOUR SIGNATURE

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Notice of Action has been furnished by U.S. Mail or hand delivery on _____, 20____, to:
(Print the respondent's name and address below)

Your Signature

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Persons with a disability who need any accommodation in order to participate should call Jan Phillips, ADA Coordinator, Alachua County Courthouse, 201 E. University Ave., Gainesville FL 32601 at (352) 337-6237 within two working days of your receipt of this notice; if you are hearing impaired call (800) 955-8771; if you are voice impaired, call (800) 955-8770.