

## **INSTRUCTIONS FOR PETITION TO SUPERSEDE AND MODIFY ADMINISTRATIVE CHILD SUPPORT ORDER**

### **When should this form be used?**

This form should be used by either parent or non-parent who has custody or the majority of the time-sharing of a minor child or children to ask the court to prospectively supersede and modify an **administrative child support order** that has previously been established in an administrative hearing or by the Department of Revenue pursuant to §409.2563, Fla.Stat., or, as set forth in §409.2563(7), Fla.Stat.

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** this document with the **clerk of the circuit court** or through Florida's eFiling Portal at [www.myflcourtagency.com](http://www.myflcourtagency.com) and keep a copy for your records. All users of the eFiling Portal are required to register and create an account with the eFiling Portal in order to file electronically. Contact the Clerk of the Circuit Court regarding fees associated with and due for this process.

With this petition, you must file the following and provide a copy to the other party:

- **Notice of Related Case Form**, Florida Supreme Court Approved Family Law Form 12.900(h).
- **Notice of Social Security Number**, Florida Supreme Court Approved Family Law Form 12.902(j). Entire social security number must be provided.
- **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c). **(This requirement cannot be waived by the parties and is mandatory.)**
- **Certificate of Compliance with Mandatory Disclosure**, Florida Family Law Rules of Procedure Form 12.932. (This must be filed within 45 days of filing the Petition, unless you and the other party have agreed not to exchange these documents.)
- **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e). (If you do not know the other party's income, you may file this worksheet after his or her financial affidavit has been filed.)
- **Designation of Current Mailing and Email Address**  
Florida Supreme Court Approved Family Law Form 12.915

## What do I do next?

For your case to proceed, you must **serve** the other party with a copy of your **petition** by **personal service**.

You must also **serve** Florida Department of Revenue (DOR) with a copy of your **petition** by serving the Deputy Agency Clerk, Bldg 2, Suite 2-4220, 2450 Shumard Oak Blvd., Tallahassee, FL 32399-0001.

After the petition is served, the other party has 20 days to answer. Your case will then generally proceed in one of the following three ways:

### **DEFAULT**

If after 20 days, no **answer** or other response has been filed, you may file a **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a), with the clerk of court. After **Default** is entered, if you have filed all of the required papers, you **MUST** file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, with the clerk of court. You will receive an Order Setting Hearing.

### **UNCONTESTED**

If the other party files an answer that agrees with everything in your petition or files an answer and waiver, **and** you have complied with **mandatory disclosure** and filed all of the required papers (unless you and the other party have agreed not to exchange **mandatory disclosure** except Family Law Financial Affidavits as the filing of Family Law Financial Affidavits cannot be waived), you **MUST** file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, with the clerk of court. You will receive an Order Setting Hearing.

### **CONTESTED**

If the other party filed 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 may be referred to mediation to resolve the disputed issues. If the respondent files an answer and counterpetition, you should answer the counterpetition within 20 days using an Answer to Counter Petition, Florida Supreme Court Approved Family Law Form 12.983(d). Following the mediation, 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. You will receive an Order Setting Hearing.

### **IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with

Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

### **IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.**

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made. If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

### **WHERE CAN I LOOK FOR MORE INFORMATION?**

**Before proceeding, you should read “General Information for Self-Represented Litigants” found at the “Getting Started” section of the Family Law Self-Help Information section of the Family Courts section of the Florida Courts website. (<https://www.flcourts.org/Resources-Services/Court-Improvement/Family-Courts/Family-Law-Self-Help-Information/Getting-Started>).**

The words that are in “bold underline” in these instructions are defined there. For further instructions, see Chapter 409, Florida Statutes.

**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 FIFTH JUDICIAL CIRCUIT,  
IN AND FOR MARION COUNTY, FLORIDA**

Case No.: \_\_\_\_\_

\_\_\_\_\_,  
Petitioner,

and

\_\_\_\_\_,  
Respondent.

**PETITION TO SUPERSEDE AND MODIFY  
ADMINISTRATIVE CHILD SUPPORT ORDER**

Petitioner, \_\_\_\_\_, being sworn, certifies that the following statements are true:

This is an action to supersede and modify an administrative child support order pursuant to §409.2563(10)(c), Fla.Stat., and Chapter 61, Fla. Stats. said order having been established pursuant to §409.2563(7)(a) or 7(c), Fla.Stats.

The Circuit Court has jurisdiction over this matter.

**SECTION I.**

1. Petitioner is the person who:

[check **only** one]

\_\_\_\_\_ has been ordered to pay child support in a DEPARTMENT OF REVENUE ADMINISTRATIVE PROCEEDING for the below-named child(ren).

\_\_\_\_\_ has been ordered to receive child support in a DEPARTMENT OF REVENUE ADMINISTRATIVE PROCEEDING for the below-named child(ren).

**Name**

**Birth date**

Child: \_\_\_\_\_

\_\_\_\_\_

Child: \_\_\_\_\_

\_\_\_\_\_

Child: \_\_\_\_\_

\_\_\_\_\_

Child: \_\_\_\_\_

\_\_\_\_\_

Child: \_\_\_\_\_

\_\_\_\_\_

2. **I have attached a copy of the administrative child support order to this Petition.**

3. Venue is proper in Marion County, Florida.
4. Petitioner's current address is: *{street address, city, state}*  
\_\_\_\_\_
5. Respondent's current address is *{street address, city, state}*  
\_\_\_\_\_
6. Both Parties are over the age of 18.
7. The Respondent is not, nor has been within a 30-day period immediately prior to this date, a person in the military service of the United States as defined by 50 U.S.C. §3911(2) and Section 521 of the Service Members Civil Relief Act.
8. A completed Notice of Social Security Number, Florida Supreme Court Approved Family Law Form 12.902(j), is filed with this petition.
9. A completed Family Law Financial Affidavit, Florida Family Law Rules of Procedure Form 12.902(b) or (c), is filed, or will be filed within forty-five (45) days of this Petition.
10. A completed Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), is filed , or will be filed within forty-five (45) days of this Petition.

**SECTION II. REQUEST**

[check all that apply]

1. \_\_\_ Petitioner requests that the Court enter an Order to supersede and prospectively modify an administrative child support order to cease all child support retroactive to the date of the filing of this petition and close out the child support ledger for the following reasons:
  - \_\_\_ Neither party receives public assistance benefits in their household and the parties do not want child support established through the court.
  - \_\_\_ Neither party receives public assistance benefits in their household and the child(ren)'s needs are being provided for.
  - \_\_\_ The parties are residing together as intact family.
  - \_\_\_ Other \_\_\_\_\_
2. \_\_\_ Petitioner requests that the Court enter an Order to supersede and prospectively modify an administrative child support, as determined by Florida's child support guidelines, §61.30, Fla. Stat., retroactive to the date of the filing of this petition.
3. \_\_\_ Petitioner requests that the Court enter an Order to supersede and modify the administrative child support order and award a child support amount that is more than or less than Florida's child support guidelines. Petitioner understands that a Motion to Deviate from

Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943, must be completed and filed before the court will consider this request.

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

[check one only]

- a. \_\_\_ Petitioner.
- b. \_\_\_ Respondent.

5. \_\_\_ Petitioner requests that uninsured medical/dental expenses for the child(ren) be paid by: [check one only]

- a. \_\_\_ Petitioner.
- b. \_\_\_ Respondent.
- c. \_\_\_ Petitioner and Respondent each pay one-half.
- d. \_\_\_ Petitioner and Respondent each pay according to the percentages in the **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902
- (e).

6. Other Relief:

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**SECTION III. CERTIFICATE OF COMPLIANCE WITH FLORIDA STATUTE 409.2563 (14)**

Petitioner certifies that a copy of the foregoing petition will be served upon the Respondent by **personal service** and that a copy of the foregoing petition will be served upon the Department of Revenue, Deputy Agency Clerk, Bldg 2, Suite 2-4220, 2450 Shumard Oak Blvd., Tallahassee, FL 32399-0001.

**I understand that I am swearing or affirming under oath to the truthfulness of the claim 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: \_\_\_\_\_

Designated Email Address(es): \_\_\_\_\_

\_\_\_\_\_  
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] This form was prepared for the: *{choose only one}* ( ) Petitioner ( ) Respondent  
This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_ *{telephone number}* \_\_\_\_\_.

# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.932, CERTIFICATE OF COMPLIANCE WITH MANDATORY DISCLOSURE (09/12)

## 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 served on 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. ONLY THE ORIGINAL OF THE COMPLETED FORM IS FILED WITH THE COURT. EXCEPT FOR THE FINANCIAL AFFIDAVIT AND CHILD SUPPORT GUIDELINES WORKSHEET, NO DOCUMENTS SHALL BE FILED IN THE COURT FILE WITHOUT A PRIOR COURT ORDER. THE DOCUMENTS LISTED ON THE FORM ARE TO BE GIVEN TO THE OTHER PARTY.** 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 (Long Form)**, 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 serve the required documents on the party seeking temporary relief. Service by e-mail **or** mail shall be at least 7 days before the temporary financial relief hearing. Service by delivery shall be no later than 5:00 p.m., 2 business days before the hearing. 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 served on any other party in your case. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.



## 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 the 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 the beginning of these forms.** The words that are in **bold underline** in these instructions are defined there. For further information, see Florida Family Law Rule of Procedure 12.285.

## 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 (Long Form)**, 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

**ONLY THE ORIGINAL OF THIS COMPLETED FORM IS  
FILED WITH THE COURT. EXCEPT FOR THE FINANCIAL  
AFFIDAVIT AND CHILD SUPPORT GUIDELINES WORKSHEET,  
NO DOCUMENTS SHALL BE FILED IN THE COURT FILE  
WITHOUT A PRIOR COURT ORDER. THE DOCUMENTS  
LISTED BELOW ARE TO BE GIVEN TO THE OTHER PARTY.**

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: \_\_\_\_\_.

[Check **all** that apply]

- a. \_\_\_\_ Financial Affidavit  
( ) 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: \_\_\_\_\_.

[Check **all** that apply]

- a. \_\_\_\_ Financial Affidavit  
( ) 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 income tax 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 an unequal distribution of marital property, enhancement or appreciation in nonmarital property, 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 [**check all used**]: ( ) e-mailed ( ) mailed ( ) faxed ( ) hand delivered to the person(s) listed below on {date}\_\_\_\_\_.

**Other party or his/her attorney:**

Name: \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

I understand that I am swearing or affirming under oath to the accuracy of my compliance with the mandatory disclosure requirements of Florida Family Law Rule of Procedure 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.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_

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] This form was prepared for the: *{choose only one}* ( ) Petitioner ( ) Respondent

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,  
*{name of business}* \_\_\_\_\_,  
*{address}* \_\_\_\_\_,  
*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_.

# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(e), CHILD SUPPORT GUIDELINES WORKSHEET (09/12)

## 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 served on the other party in your case. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

## 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 you want to keep your address confidential because you are the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

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 expense figures from other frequencies to monthly. You should do this as follows:

Instructions for Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet (09/12)

<b>If payment is twice per month</b>	Payment amount	x	2	=	<b>Monthly amount</b>
<b>If payment is every two weeks</b>	Payment amount	x	26	=	Yearly amount due
	Yearly amount	÷	12	=	<b>Monthly amount</b>
<b>If payment is weekly</b>	Weekly amount	x	52	=	Yearly amount due
	Yearly amount	÷	12	=	<b>Monthly amount</b>

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 of 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
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

Instructions for Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet (09/12)

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
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	2119
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

Instructions for Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet (09/12)



Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
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

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
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

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
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  
[check all used]: ( ) e-mailed ( ) mailed ( ) faxed ( ) hand delivered to the person(s) listed  
below on {date} \_\_\_\_\_.

**Other party or his/her attorney:**

Name: \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

\_\_\_\_\_  
Signature of Party or his/her Attorney

Printed Name: \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

Florida Bar Number: \_\_\_\_\_

<b>CHILD SUPPORT GUIDELINES WORKSHEET</b>			
	<b>A. FATHER</b>	<b>B. MOTHER</b>	<b>TOTAL</b>
<b>1.</b> Present Net Monthly Income Enter the amount from line 27, Section I of Florida Family Law Rules of Procedure Form 12.902(b) or (c), Financial Affidavit.			
<b>2.</b> Basic Monthly Obligation There is (are) {number} _____ minor child(ren) common to the parties. Using the total amount from line 1, enter the appropriate amount from the child support guidelines chart.			
<b>3.</b> Percent of Financial Responsibility Divide the amount on line 1A by the total amount on line 1 to get Father's percentage of 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 of financial responsibility. Enter answer on line 3B.	%	%	
<b>4.</b> Share of Basic Monthly Obligation 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.			
<b>Additional Support — Health Insurance, Child Care &amp; Other</b>			
<b>5. a.</b> 100% of Monthly Child Care Costs [Child care costs should not exceed the level required to provide quality care from a licensed source. See section 61.30(7), Florida Statutes, for more information.]			
<b>b.</b> Total Monthly Child(ren)'s Health Insurance Cost [This is only amounts actually paid for health insurance on the child(ren).]			

<b>CHILD SUPPORT GUIDELINES WORKSHEET</b>			
	<b>A. FATHER</b>	<b>B. MOTHER</b>	<b>TOTAL</b>
<b>c.</b> Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs			
<b>d.</b> Total Monthly Child Care & Health Costs [Add lines 5a + 5b +5c].			
<b>6.</b> 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.			
<b>Statutory Adjustments/Credits</b>			
<b>7. a.</b> Monthly child care payments actually made			
<b>b.</b> Monthly health insurance payments actually made			
<b>c.</b> 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 section 61.30 (8), Florida Statutes)			
<b>8.</b> Total Support Payments actually made (Add 7a through 7c)			
<b>9. MINIMUM CHILD SUPPORT OBLIGATION FOR EACH PARENT</b> [Line 4 plus line 6; minus line 8]			
<b>Substantial Time-Sharing (GROSS UP METHOD) If each parent exercises time-sharing at least 20 percent of the overnights in the year (73 overnights in the year), complete Nos. 10 through 21</b>			
	<b>A. FATHER</b>	<b>B. MOTHER</b>	<b>TOTAL</b>
<b>10.</b> Basic Monthly Obligation x 150% [Multiply line 2 by 1.5]			

<b>CHILD SUPPORT GUIDELINES WORKSHEET</b>			
	<b>A. FATHER</b>	<b>B. MOTHER</b>	<b>TOTAL</b>
<b>11.</b> 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.			
<b>12.</b> 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.	%	%	
<b>13.</b> Parent's support multiplied by other Parent's percentage of overnights. [Multiply line 11A by line 12B. Enter this number in 13A. Multiply line 11B by line 12A. Enter this number in 13B.]			
<b>Additional Support — Health Insurance, Child Care &amp; Other</b>			
<b>14. a.</b> Total Monthly Child Care Costs [Child care costs should not exceed the level required to provide quality care from a licensed source. See section 61.30(7), Florida Statutes, for more information.]			
<b>b.</b> Total Monthly Child(ren)'s Health Insurance Cost [This is only amounts actually paid for health insurance on the child(ren).]			
<b>c.</b> Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs.			
<b>d.</b> Total Monthly Child Care & Health Costs [Add lines 14a + 14b + 14c.]			

<b>CHILD SUPPORT GUIDELINES WORKSHEET</b>			
	<b>A. FATHER</b>	<b>B. MOTHER</b>	<b>TOTAL</b>
<b>15. Additional Support Payments.</b> 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.			
<b>Statutory Adjustments/Credits</b>			
<b>16. a.</b> Monthly child care payments actually made			
<b>b.</b> Monthly health insurance payments actually made			
<b>c.</b> 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 section 61.30(8), Florida Statutes]			
<b>17.</b> Total Support Payments actually made [Add 16a through 16c]			
<b>18.</b> Total Additional Support Transfer Amount [Line 15 minus line 17; enter any negative number as zero]			
<b>19.</b> Total Child Support Owed from Father to Mother [Add line 13A plus line 18A]			
<b>20.</b> Total Child Support Owed from Mother to Father [Add line 13B plus line 18B]			
<b>21. Actual Child Support to Be Paid.</b> [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]	\$		

**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.



[check **one** only]

- a. \_\_\_\_ **Deviation from the guidelines amount is requested.** The Motion to Deviate from 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 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] This form was prepared for the: *{choose only one}* ( ) Petitioner ( ) Respondent

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_.

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.915  
DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS  
(06/18)**

**When should this form be used?**

This form should be used to inform the clerk and the other **party** of your current mailing and e-mail address(es) or **any change of address**. It is very important that the court and the other party in your case have your correct address.

A party not represented by an attorney may choose to designate e-mail address(es) for **service**. A primary and up to two secondary e-mail addresses can be designated. If you do so and the other party is represented by an attorney or has also designated e-mail address(es) for service, e-mail will be the **exclusive means of service**.

If there is any change in your mailing or e-mail address(es), you must complete a new form, file it with the clerk, and serve a copy on any other party or parties in your case.

**What should I do next?**

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 served on any other party in your case. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

**IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

**IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings

by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

### **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.

### **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.

### DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS

I, {full legal name}, \_\_\_\_\_, being sworn, certify that:

#### **MAILING ADDRESS:**

My current mailing address is:

{Street or Post Office Box} \_\_\_\_\_,

{City}, \_\_\_\_\_, {State}, \_\_\_\_\_, {Zip} \_\_\_\_\_.

{Telephone No.} \_\_\_\_\_ {Fax No.} \_\_\_\_\_.

#### **E-MAIL ADDRESS:**

***{Do not provide an e-mail address unless you choose to serve and receive all documents in the future only by e-mail. If you are a self-represented litigant (appearing without an attorney), you are not required to serve or receive documents by electronic mail (e-mail); however, once you designate an e-mail address, that address will be the exclusive means of serving and receiving documents. Once you choose to serve and receive documents by e-mail, you cannot change your decision.}***

I wish to designate the following e-mail address(es) for the purposes of serving and receiving documents:

\_\_\_\_\_

**I understand that I must keep the clerk's office and the opposing party or parties notified of my current mailing and e-mail address(es) and that all future papers in this lawsuit will be served at the address(es) on record at the clerk's office.**

I certify that a copy of this document was \_\_\_\_\_ e-mailed \_\_\_\_\_ 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: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Party

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] This form was prepared for the: *{choose only one}* \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,  
*{name of business}* \_\_\_\_\_,  
*{street}* \_\_\_\_\_  
*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{zip code}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_

# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(b), FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM) (01/15)

## 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** unless:

- (1) You are filing a simplified dissolution of marriage under rule 12.105 and both parties have waived the filing of a financial affidavit;
- (2) You have no minor children, no support issues, and have filed a written settlement agreement disposing of all financial issues; or
- (3) The court lacks jurisdiction to determine any financial issues.

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 served on the other party in your case within 45 days of being served with the petition, if it is not served on him or her with your initial papers. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

## 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 Florida Family Law Rule of Procedure 12.285.

## Special notes...

If you want to keep your address confidential because you are the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **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.

Instructions to Florida Family Law Rules of Procedure Form 12.902(b), Family Law Financial Affidavit (Short Form) (01/15)

**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.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_,  
Petitioner,

and

\_\_\_\_\_,  
Respondent.

## FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM)

(Under \$50,000 Individual Gross Annual Income)

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

My Occupation: \_\_\_\_\_ Employed by: \_\_\_\_\_

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

Pay rate: \$ \_\_\_\_\_ ( ) every week ( ) every other week ( ) twice a month ( ) monthly  
( ) other: \_\_\_\_\_

\_\_\_ Check here if unemployed and explain on a separate sheet your efforts to find employment.

### SECTION I. PRESENT MONTHLY GROSS INCOME:

**All amounts must be MONTHLY.** See the instructions with this form to figure out money amounts for anything that is NOT paid monthly. Attach more paper, if needed. Items included under "other" should be listed separately with separate dollar amounts.

1. \$ \_\_\_\_\_ Monthly gross salary or wages
2. \_\_\_\_\_ Monthly bonuses, commissions, allowances, overtime, tips, and similar payments
3. \_\_\_\_\_ Monthly business income from sources such as self-employment, partnerships, close corporations, and/or independent contracts (gross receipts minus ordinary and necessary expenses required to produce income) (Attach sheet itemizing such income and expenses.)
4. \_\_\_\_\_ Monthly disability benefits/SSI
5. \_\_\_\_\_ Monthly Workers' Compensation
6. \_\_\_\_\_ Monthly Unemployment Compensation
7. \_\_\_\_\_ Monthly pension, retirement, or annuity payments
8. \_\_\_\_\_ Monthly Social Security benefits
9. \_\_\_\_\_ Monthly alimony actually received (Add 9a and 9b)
  - 9a. From this case: \$ \_\_\_\_\_
  - 9b. From other case(s): \_\_\_\_\_
10. \_\_\_\_\_ Monthly interest and dividends
11. \_\_\_\_\_ Monthly rental income (gross receipts minus ordinary and necessary expenses)



required to produce income) (Attach sheet itemizing such income and expense items.)

- 12. \_\_\_\_\_ Monthly income from royalties, trusts, or estates
- 13. \_\_\_\_\_ Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses
- 14. \_\_\_\_\_ Monthly gains derived from dealing in property (not including nonrecurring gains)
- 15. \_\_\_\_\_ Any other income of a recurring nature (list source) \_\_\_\_\_
- 16. \_\_\_\_\_
- 17. \$ \_\_\_\_\_ **TOTAL PRESENT MONTHLY GROSS INCOME** (Add lines 1–16)

**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 (Add 25a and 25b)
  - 25a. from this case: \$ \_\_\_\_\_
  - 25b. from other case(s):\$ \_\_\_\_\_
- 26. \$ \_\_\_\_\_ **TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES** (Add lines 18 through 25).
- 27. \$ \_\_\_\_\_ **PRESENT NET MONTHLY INCOME** (Subtract line 26 from line 17)

**SECTION II. AVERAGE MONTHLY EXPENSES**

**Proposed/Estimated Expenses.** If this is a dissolution of marriage case **and** your expenses as listed below do not reflect what you actually pay currently, you should write "estimate" next to each amount that is estimated.

**A. HOUSEHOLD:**

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

**B. AUTOMOBILE**

Gasoline \$ \_\_\_\_\_  
 Repairs \$ \_\_\_\_\_  
 Insurance \$ \_\_\_\_\_

**C. CHILD(REN)'S EXPENSES**

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

**D. INSURANCE**

Medical/Dental (if not listed on lines 23 or 45) \$ \_\_\_\_\_  
 Child(ren)'s medical/dental \$ \_\_\_\_\_  
 Life \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ \$ \_\_\_\_\_

**E. OTHER EXPENSES NOT LISTED ABOVE**

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

**F. PAYMENTS TO CREDITORS**

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

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

**SUMMARY**

29. \$ \_\_\_\_\_ **TOTAL PRESENT MONTHLY NET INCOME** (from line 27 of SECTION I. INCOME)

30. \$ \_\_\_\_\_ **TOTAL MONTHLY EXPENSES** (from line 28 above)

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.)

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.)

**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 the beginning of these forms and 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). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any asset(s) which you are requesting the judge award to you.	Current Fair Market Value	Nonmarital (check 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"/> Check here if additional pages are attached.			
<b>Total Assets</b> (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). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any debt(s) for which you believe you should be responsible.		Current Amount Owed	Nonmarital (check 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"/>	Other			
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	_____ Check here if additional pages are attached.			
<b>Total Debts</b> (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		Possible Value	Nonmarital (check correct column)	
Check the line next to any contingent asset(s) which you are requesting the judge award to you.			husband	wife
<input type="checkbox"/>		\$		
<input type="checkbox"/>				
<b>Total Contingent Assets</b>		\$		

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

**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.)

[Check **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 [**check all used**]: ( ) e-mailed ( ) mailed ( ) faxed ( ) hand delivered to the person(s) listed below on {date} \_\_\_\_\_.

**Other party or his/her attorney:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_

**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: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_

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] This form was prepared for the: *{choose only one}* ( ) Petitioner ( ) Respondent

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_ *{telephone number}* \_\_\_\_\_.

## **INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.900(h), NOTICE OF RELATED CASES (11/13)**

### **When should this form be used?**

Florida Rule of Judicial Administration 2.545(d) requires the **petitioner** in a family law case to file with the court a notice of related cases, if any. Your circuit may also require this form to be filed even if there are no related cases. A case is considered related if

- it involves the same parties, children, or issues and is pending when the family law case is filed; or
- it affects the court's jurisdiction to proceed; or
- an order in the related case may conflict with an order on the same issues in the new case; or
- an order in the new case may conflict with an order in the earlier case.

This form is used to provide the required notice to the court.

This form should be typed or printed in black ink. It must be **filed** with the **clerk of the circuit court** with the initial pleading in the family law case.

### **What should I do next?**

A copy of the form must be served on the presiding judges, either the chief judge or the family law administrative judge, and all parties in the related cases. You should also keep a copy for your records. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

### **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 Florida Rule of Judicial Administration 2.545(d).

### **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 **must** also 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 RELATED CASES

1. Petitioner submits this Notice of Related Cases as required by Florida Rule of Judicial Administration 2.545(d). A related case may be an open or closed civil, criminal, guardianship, domestic violence, juvenile delinquency, juvenile dependency, or domestic relations case. A case is "related" to this family law case if it involves any of the same parties, children, or issues and it is pending at the time the party files a family case; if it affects the court's jurisdiction to proceed; if an order in the related case may conflict with an order on the same issues in the new case; or if an order in the new case may conflict with an order in the earlier litigation.

[check **one** only]

**There are no related cases.**

**The following are the related cases (add additional pages if necessary):**

#### Related Case No. 1

Case Name(s): \_\_\_\_\_

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

Dissolution of Marriage

Paternity

Custody

Adoption

Child Support

Modification/Enforcement/Contempt Proceedings

Juvenile Dependency

Juvenile Delinquency

Termination of Parental Rights

Criminal

Domestic/Sexual/Dating/Repeat

Mental Health

Violence or Stalking Injunctions

Other {specify} \_\_\_\_\_

State where case was decided or is pending:  Florida  Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases check **all** that apply]:

pending case involves same parties, children, or issues;

may affect court's jurisdiction;

order in related case may conflict with an order in this case;

order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_

\_\_\_\_\_

**Related Case No. 2**

Case Name(s): \_\_\_\_\_

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

Dissolution of Marriage

Paternity

Custody

Adoption

Child Support

Modification/Enforcement/Contempt Proceedings

Juvenile Dependency

Juvenile Delinquency

Termination of Parental Rights

Criminal

Domestic/Sexual/Dating/Repeat

Mental Health

Violence or Stalking Injunctions

Other {specify} \_\_\_\_\_

State where case was decided or is pending:  Florida  Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases check all that apply]:

pending case involves same parties, children, or issues;

- may affect court's jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Related Case No. 3**

Case Name(s): \_\_\_\_\_  
 Petitioner \_\_\_\_\_  
 Respondent \_\_\_\_\_  
 Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

- |  |  |
|--|--|
| <input type="checkbox"/> Dissolution of Marriage   | <input type="checkbox"/> Paternity                                     |
| <input type="checkbox"/> Custody   | <input type="checkbox"/> Adoption                                      |
| <input type="checkbox"/> Child Support   | <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings |
| <input type="checkbox"/> Juvenile Dependency   | <input type="checkbox"/> Juvenile Delinquency                          |
| <input type="checkbox"/> Termination of Parental Rights                                    | <input type="checkbox"/> Criminal                                      |
| <input type="checkbox"/> Domestic/Sexual/Dating/Repeat<br>Violence or Stalking Injunctions | <input type="checkbox"/> Mental Health                                 |
|  | <input type="checkbox"/> Other {specify} _____                         |

State where case was decided or is pending:  Florida  Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases check all that apply]:

- pending case involves same parties, children, or issues;
- may affect court's jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. [check **one** only]

I **do not** request coordination of litigation in any of the cases listed above.

\_\_\_\_\_ I **do** request coordination of the following cases: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. [check **all** that apply]

\_\_\_\_\_ Assignment to one judge

\_\_\_\_\_ Coordination of existing cases

will conserve judicial resources and promote an efficient determination of these cases because: \_\_\_\_\_.

4. The Petitioner acknowledges a continuing duty to inform the court of any cases in this or any other state that could affect the current proceeding.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Petitioner's Signature

Printed Name: \_\_\_\_\_

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

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

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

### CERTIFICATE OF SERVICE

I **CERTIFY** that I delivered a copy of this Notice of Related Cases to the \_\_\_\_\_ County Sheriff's Department or a certified process server for service on the Respondent, and [**check all used**] ( ) e-mailed ( ) mailed ( ) hand delivered, a copy to {name} \_\_\_\_\_, who is the [**check all that apply**] ( ) judge assigned to new case, ( ) chief judge or family law administrative judge, ( ) {name} \_\_\_\_\_ a party to the related case, ( ) {name} \_\_\_\_\_, a party to the related case on {date} \_\_\_\_\_.

\_\_\_\_\_  
Signature of Petitioner/Attorney for Petitioner

Printed Name: \_\_\_\_\_

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

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

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

Florida Bar Number: \_\_\_\_\_

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:**

[fill in **all** blanks] This form was prepared for the {choose **only one**}: ( ) Petitioner ( ) Respondent.

This form was completed with the assistance of:

{name of individual} \_\_\_\_\_,

{name of business} \_\_\_\_\_,

{address} \_\_\_\_\_,

{city} \_\_\_\_\_ {state} \_\_\_\_\_, {telephone number} \_\_\_\_\_.

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.902(j),  
NOTICE OF SOCIAL SECURITY NUMBER  
(06/18)**

**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.

**CONFIDENTIAL INFORMATION**

Under Rule 2.420 of the Florida Rules of Judicial Administration, Social Security Numbers are confidential; however, this information is required by the Florida Statutes. A Notice of Confidential Information within Court Filing must be filed with the Notice of Social Security Number. This Notice is an appendix to rule 2.420.

**IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

**What should I do next?**

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

**IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial**

**Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

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 chapter 61, 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, fax, or e-mail information at the bottom of this form.** Instead, file a **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 \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ 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 by the applicable section of the Florida Statutes. My date of birth is \_\_\_\_\_.

[Choose **one** only]

- \_\_\_\_\_ 1. This notice is being filed in a dissolution of marriage case in which the parties have **no** minor or dependent child(ren) 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 or dependent children in common. The minor or dependent 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 of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on by \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
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] This form was prepared for the: *{choose only one}* \_\_\_\_\_ Petitioner \_\_\_ Respondent  
This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,  
*{name of business}* \_\_\_\_\_,  
*{address}* \_\_\_\_\_,  
*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{zip code}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_

**INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM  
12.910(a)  
SUMMONS: PERSONAL SERVICE ON AN INDIVIDUAL  
(03/17)**

**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 email, 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

- a. directly to the other party, **or**
- b. 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 the beginning of these forms.** For further information regarding service of process, see chapters 48 and 49, Florida Statutes, and Florida Family Law Rule of Procedure 12.070, as well as the instructions for **Notice of Action for Dissolution of Marriage (No Child or Financial Support)**, Florida Supreme Court Approved Family Law Form 12.913(a)(1), **Notice of Action for Family Cases with Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.913(a)(2), **Affidavit of Diligent Service and Inquiry**, Florida Family Law Rules of Procedure Form 12.913(b), and **Affidavit of Diligent Search**, Florida Family Law Rules of Procedure Form 12.913(c).

### **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 an **Affidavit of Military Service**, Florida Supreme Court Approved Family Law Form 12.912(b), before a default may be granted.

Instructions for Florida Family Law Rules of Procedure Form 12.910(a), Summons: Personal Service on an Individual (03/17)

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 serve a copy of your written response on the party serving this summons at:

{Name and address of party serving summons} \_\_\_\_\_  
\_\_\_\_\_.

**If the party serving summons has designated email address(es) for service or is represented by an attorney, you may designate email address(es) for service by or on you. Service must be in accordance with Florida Rule of Judicial Administration 2.516.**

**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 Designation of Current Mailing and Email 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, [Designation of Current Mailing and Email 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 être saisis par la suite, sans aucun préavis ultérieur du tribunal. Il y a d'autres obligations juridiques et vous pouvez requérir les services immédiats d'un avocat. Si vous ne connaissez pas d'avocat, vous pourriez téléphoner à un service de référence d'avocats ou à un bureau d'assistance juridique (figurant à l'annuaire de téléphones).

Si vous choisissez de déposer vous-même une réponse écrite, il vous faudra également, en même temps que cette formalité, faire parvenir ou expédier une copie au carbone ou une photocopie de votre réponse écrite à la partie qui vous dépose cette citation.

Nom et adresse de la partie qui dépose cette citation: \_\_\_\_\_

**Les photocopies de tous les documents tribunaux de cette cause, y compris des arrêts, sont disponibles au bureau du greffier. Vous pouvez consulter 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, Designation of Current Mailing and Email Address.) Les documents de l'avenir de ce procès seront envoyés à l'adresse que vous donnez au bureau du greffier.**

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

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 SUPREME COURT APPROVED FAMILY LAW FORM 12.910(b), PROCESS SERVICE MEMORANDUM (11/15)

## When should this form be used?

You should use this form to give the sheriff's department (or private process server) instructions for serving the other **party** in your case with the **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a), and other papers to be served. On this form you can tell the sheriff's department the best times to find the person at work and/or at home. You can also include a map to the other person's home or work place to help the sheriff find the person and deliver the summons. Do not forget to attach to the summons a copy of your initial petition and any other papers you want personally served on the other party.

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 petition was filed and attach a copy to the **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a). You should also keep a copy for your records.

## IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

## 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.** You should read the instructions for **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a), for additional information.

## IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT**

**REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

### **Special notes...**

If you fear that disclosing your address would put you in danger because you are the victim of sexual battery, aggravated child abuse, stalking, aggravated stalking, harassment, aggravated battery, or domestic violence, you should complete a **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h), file it with the clerk, and write confidential in the space provided on the petition.

**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 **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,

### PROCESS SERVICE MEMORANDUM

**TO:** \_\_\_\_\_ Sheriff of \_\_\_\_\_ County, Florida; \_\_\_\_\_ Division  
\_\_\_\_\_ Private process server: \_\_\_\_\_

Please serve the *{name of document(s)}* \_\_\_\_\_

in the above-styled cause upon:

Party: *{full legal name}* \_\_\_\_\_

Address or location for service: \_\_\_\_\_

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

If the party to be served owns, has, and/or is known to have guns or other weapons, describe what type of weapon(s): \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

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

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party

\*Printed Name: \_\_\_\_\_

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

\*City, State, Zip: \_\_\_\_\_

\*Telephone Number: \_\_\_\_\_

\*Fax Number: \_\_\_\_\_

\*Designated E-mail Address(es) \_\_\_\_\_

\_\_\_\_\_

**\* Please see the Special Notes section in the instructions to this form regarding Florida Supreme Court Approved Family Law Form 12.980(h), Request for Confidential Filing of Address, which may be used if you need to keep your addresses or telephone numbers confidential for safety reasons.**

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:**

[fill in **all** blanks] This form was prepared for the Petitioner. This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{zip code}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_