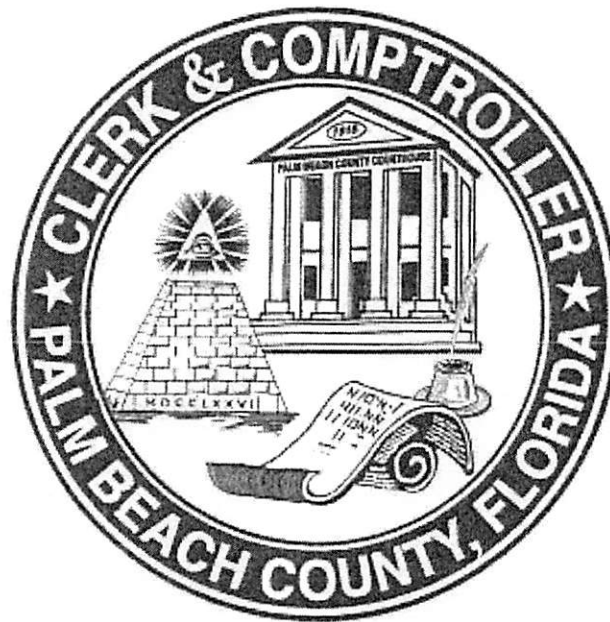


Sharon R. Bock
CLERK & COMPTROLLER
SELF SERVICE CENTER

Your Guide Through The Courts



Packet #22 A

Revised 09/2014

**ANSWER TO
SUPPLEMENTAL PETITION
-WITH DEPENDENT OR MINOR CHILD (REN)-**

NON-REFUNDABLE

(56 PAGES)

\$ 20.00

SELF SERVICE CENTER SERVICES

All instructions and forms distributed by the Clerk & Comptroller are provided as a public service to persons seeking to represent themselves in court without the assistance of an attorney. These documents are meant to serve as a guide only, and to assist *pro se* (self-represented) litigants with their cases. Any person using these instructions and/or forms does so at his or her own risk, and the Clerk shall not be responsible for any losses incurred by any person in reliance on the instructions and/or forms.

Attorney Consultation*	\$15.00/15 minutes
Attorney Consultation*	\$30.00/30 minutes
Attorney Consultation*	\$60.00/60 minutes
Deputy Clerk Signing	\$3.50/signature
Notary signing	\$10.00/signature
Copies prior to filing	\$.15/page
Single Forms	\$1.00/page
Fax Services	\$1.00/page
Community Resource Referral- pamphlets	NO FEE

* Attorneys do not provide legal advice - will assist on procedural matters/filling out legal forms

****FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE****

You may file and obtain information at the following locations:

Palm Beach County Courthouse
205 N. Dixie Highway, Rm #3.2200
West Palm Beach, Florida 33401
561-355-7048

North County Courthouse
3188 PGA Blvd
Palm Beach Gardens, Florida 33410
561-624-6650

South County Courthouse
200 W. Atlantic Ave.
Delray Beach, Florida 33444
561-274-1588

West County Courthouse
2950 State Road 15, Rm. #S-100
Belle Glade, Florida 33430
561-996-4843

The Self Service Information Line

Unified Family Court Dept. (for information regarding an existing case)

Visit us at our web site

Legal Aid Society (if you can't afford an attorney)

Lawyer Referral Service of the PBC Bar Association

(561) 355-7048

(561) 355-6511

www.mypalmbeachclerk.com

(561) 655-8944

(561) 687-3266

Revised 05/2013

ANSWER TO SUPPLEMENTAL PETITION -WITH DEPENDENT OR MINOR CHILD (REN)-

Packet # 22 A

When should this form be used?

This form should be used when you are responding to a **supplemental petition** for modification of Parenting Plan, time-sharing schedule, child support, or alimony. This form is used to admit or deny all of the allegations in the supplemental petition if you do not plan to file a **counterpetition**.

The Respondent must complete and file the following forms: (see instruction on each form)	Page
✓ Answer to Supplemental Petition 12.903(e)	8
✓ Family Law Financial Affidavit (Short Form) 12.902(b), (09/12) (income less than \$50,000)	12
✓ Family Law Financial Affidavit (Long Form) 12.902(c) (income more than \$50,000). By request only.	
✓ Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit 12.902(d)	19
✓ Child Support Guidelines Worksheet 12.902(e), (09/12) <i>(If you do not know your other party's income, you may file this worksheet after his or her financial affidavit has been served on you.)</i>	30

These forms should be completed and filed, IF APPLICABLE

✓ Certificate of Compliance with Mandatory Disclosure 12.932, (09/12) <i>(This must be filed within 45 days of service of the supplemental petition on you, if not filed at the time of you file your answer, unless you and the other party have agreed not to exchange these documents.)</i>	37
✓ Notice of Social Security Number 12.902(j) <i>(if not previously filed)</i>	41
✓ Motion for Mediation, (02/14) <i>(if not filed by petitioner or there is no agreement on all issues)</i>	43
✓ Notice for Trial <i>(if the petitioner has not filed a Notice for Trial)</i>	46
✓ Disclosure from Nonlawyer 12.900(a), (11/12) <i>(use only if someone not an attorney helped you fill out the forms)</i>	49
✓ Designation of Current Mailing and E-Mail Address and Directions to Provide E-Mail Address to Court Administration, A.O. 2.310, (04/13)	53
✓ Notice of Change of Address, (09/14) <i>(Must be filed whenever you change your address)</i>	56
✓ Settlement Agreement , (if not filed by petitioner) <i>if you have reached an agreement on any or all of the issues. Although there is no form for this in these Florida Family Law Forms, you may construct a settlement agreement using the pertinent sections contained in Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Child(ren), Florida Supreme Court Approved Family Law Form 12.902(f) (1). (Not included on this packet, however, they are available at the Self Service Center for a fee)</i>	

Fees:

No filing fee is required

Mediation fees per person:

if the combined income of the parties is \$50,000.00 or less \$ 60.00*

if the combined income is \$50,000.00 or more \$ 120.00*

If the combined income of the parties is greater than \$100,000.00, private mediation is required.

* Fees may be paid by cash, credit card, your personal check or money order payable to Sharon R. Bock, Clerk & Comptroller, Palm Beach County.

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

READ THE INSTRUCTIONS/INFORMATION BEFORE COMPLETING THE FORMS FOR FILING

DO NOT SIGN ANY DOCUMENTS THAT REQUIRE A NOTARY OR DEPUTY CLERK UNTIL YOU ARE IN FRONT OF THE NOTARY OR DEPUTY CLERK

INSTRUCTIONS FOR FILING

- The forms should be typed or printed in black ink.
- Some of the forms must be signed before a notary or deputy clerk.
- Make 2 copies of all the documents that you complete (only ones that you are using) – one for yourself and one for other party.
- The respondent should file the originals with the Clerk & Comptroller's office. Each *original* form should have all pages clipped together before filing (copies may be stapled together).
- If you want your copies stamped with the date of filing, make sure you give the Clerk your copies. (If you mail your documents, make sure you provide an extra pre-addressed stamped envelope so they may return your copies)
- After mediation, the petitioner may file a **Notice for Trial** to request a final hearing.
- If mediation is not applicable then file **Notice for Trial**.
- After the Notice for Trial has been filed, the parties will be contacted by mail regarding a court date.
- You will **not** get a final hearing date for your case unless you file the **Notice for Trial**.
- **IT IS YOUR RESPONSIBILITY TO KEEP TRACK OF YOUR CASE**

CAUTION:

Forms are to be completed in block letters or typed; NO EXCEPTIONS! Names must be the same on all forms completed by the parties; no full names on one document and initials on another. This packet may not contain all the forms you may need to file your case. Additional forms are available in the Clerk & Comptroller's Self Service Center at each courthouse location. The Clerk & Comptroller's Clerks can not suggest specific information to be included in the blanks on your forms or fill out forms for you.

REMEMBER !

PROVIDE PRE-ADDRESSED (PRINT NAME AND ADDRESS) STAMPED ENVELOPES WITH YOUR PAPERS FOR EACH PARTY ON YOUR CASE: Petitioner, Respondent, and/or Attorney (if applicable)

It is your responsibility to file any change to your address on the attached form.

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.903(e),
ANSWER TO SUPPLEMENTAL PETITION (12/10)**

When should this form be used?

This form should be used when you are responding to a supplemental petition for modification of Parenting Plan, time-sharing schedule, child support, or alimony. This form is used to admit or deny all of the allegations in the supplemental petition if you do not plan to file a counterpetition. There is no form for a counterpetition to a supplemental petition in these Family Law Forms. If you want to file a counterpetition to a supplemental petition you will need to either seek legal assistance or create a form yourself. You may construct an answer and counterpetition using the pertinent sections contained in the **Answer to Petition and Counterpetition for Dissolution of Marriage with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.903(c)(1), or **Answer to Petition and Counterpetition for Dissolution of Marriage with Property but No Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.903(c)(2).

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 case was filed and keep a copy for your records. This must be done within 20 days of receiving the supplemental petition.

What should I do next?

A copy of this form, along with all of the other forms required with this answer, must be mailed or hand delivered to the other party in your case. Regardless of whether you file a counterpetition, you have 20 days to answer after being served with the other party's supplemental petition. After you file your answer, the case will generally proceed in one of the following two ways:

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

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

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. See chapter 61, Florida Statutes, for more information.

Instructions for Florida Supreme Court Approved Family Law Form 12.903(e), Answer to Supplemental Petition (12/10)

Special notes...

With this form, you must also file the following:

- ✓ **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d), if the case involves child(ren).
- ✓ **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e), if child support is an issue. (If you do not know the other party's income, you may file this worksheet after his or her financial affidavit has been served on you.)
- ✓ **Settlement Agreement**, if you have reached an agreement on any or all of the issues. Although there is no form for this in these Florida Family Law Forms, you may construct a settlement agreement using the pertinent sections contained in **Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.902(f)(1), or **Marital Settlement Agreement for Dissolution of Marriage with [Property but] No Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.902(f)(2).
- ✓ **Notice of Social Security Number**, Florida Supreme Court Approved Family Law Form 12.902(j), if not previously filed.
- ✓ **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c). (This must be filed within 45 days of service of the supplemental petition on you, if not filed at the time you file your answer.)
- ✓ **Certificate of Compliance with Mandatory Disclosure**, Florida Family Law Rules of Procedure Form 12.932. (This must be filed within 45 days of service of the supplemental petition on you, if not filed at the time of you file your answer, unless you and the other party have agreed not to exchange these documents.)

Parenting and Time-Sharing... If you and the other party are unable to agree on parenting arrangements and a time-sharing schedule, a judge will decide for you as part of establishing a Parenting Plan. The judge will decide the parenting arrangements and time-sharing schedule based on the child(ren)'s best interests. Regardless of whether there is an agreement, the court reserves jurisdiction to modify issues relating to the minor child(ren).

The judge may request a parenting plan recommendation or appoint a guardian ad litem in your case. This means that a neutral person will review your situation and report to the judge concerning parenting issues. The purpose of such intervention is to be sure that the best interests of the child(ren) is (are) being served. For more information, you may consult section 61.13, Florida Statutes. A parenting course may be required prior to entry of a final judgment. You should contact the clerk, family law intake staff, or judicial assistant about requirements for parenting courses or mediation where you live.

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

Shared Parental Responsibility

Sole Parental Responsibility

Supervised Time-Sharing

No contact

Parenting Plan

Parenting Plan Recommendation

Time-Sharing Schedule

Instructions for Florida Supreme Court Approved Family Law Form 12.903(e), Answer to Supplemental Petition (12/10)

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

Temporary Relief... If you need temporary relief regarding parental responsibility and time-sharing with child(ren), child support or alimony, you may file a **Motion for Temporary Support with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.947(a) or, if you need temporary relief regarding alimony and there are no dependent or minor child(ren), you may file a **Motion for Temporary Support with No Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.947(c). For more information, see the instructions for these forms.

Settlement Agreement... If you and the other party are able to reach an agreement on any or all of the issues, you should file a Settlement Agreement. Although there is no form for this in these Florida Family Law Forms, you may construct a settlement agreement using the pertinent sections contained in **Marital Settlement Agreement for Dissolution of Marriage with Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.902(f)(1), or **Marital Settlement Agreement for Dissolution of Marriage with No Dependent or Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.902(f)(2). Both parties must sign this agreement before a notary public or deputy clerk. Any issues on which you are unable to agree will be considered contested and settled by the judge at the final hearing.

Final Judgment Form... These family law forms contain a **Supplemental Final Judgment Modifying Parental Responsibility, Visitation, or Parenting Plan/Time-Sharing Schedule or Other Relief**, Florida Supreme Court Approved Family Law Form 12.993(a), a **Supplemental Final Judgment Modifying Child Support**, Florida Supreme Court Approved Family Law Form 12.993(b), and a **Supplemental Final Judgment Modifying Alimony**, Florida Supreme Court Approved Family Law Form 12.993(c), which the judge may use, as appropriate. You should check with the clerk, family law intake staff, or judicial assistant to see if you need to bring a final judgment with you to the hearing. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

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

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH COUNTY, FLORIDA

Case No.: _____
Division: _____

_____,
Petitioner,

and

_____,
Respondent.

ANSWER TO SUPPLEMENTAL PETITION

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

1. I **agree** with Petitioner as to the allegations raised in the following numbered paragraphs in the Supplemental Petition and, therefore, **admit** those allegations: *{indicate section and paragraph number}* _____
2. I **disagree** with Petitioner as to the allegations raised in the following numbered paragraphs in the Supplemental Petition and, therefore, **deny** those allegations: *{indicate section and paragraph number}* _____
3. I currently am unable to admit or deny the following paragraphs due to lack of information: *{indicate section and paragraph number}* _____
4. If not previously filed in this case, a completed Family Law Financial Affidavit, Florida Family Law Rules of Procedure Form 12.902(b) or (c) (), is filed with this answer, or () will be, timely filed.
5. If not previously filed in this case, a completed Notice of Social Security Number, Florida Supreme Court Approved Family Law Form 12.902(j), is filed with this answer.

[Choose if applies]

6. ____ This case involves minor child(ren), and a completed Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit, Florida Supreme Court Approved Family Law Form 12.902(d), is filed with this answer.
7. ____ This case involves child support, and a completed Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), () is filed or () will be filed with the court.

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

Petitioner or his/her attorney:

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

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

Dated: _____

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

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

NOTARY PUBLIC or DEPUTY CLERK

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

____ Personally known
____ Produced identification
Type of identification produced _____

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

[fill in all blanks]

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

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(b), FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM) (09/12)

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:

- (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.

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 FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH 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)

A. HOUSEHOLD:

B. AUTOMOBILE

D. INSURANCE

E. OTHER EXPENSES NOT LISTED ABOVE

F. PAYMENTS TO CREDITORS

SUMMARY

SECTION III. ASSETS AND LIABILITIES

Self Service Packet # 22A Page - 14 -

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
Cash (on hand)	\$		
Cash (in banks or credit unions)			
Stocks, Bonds, Notes			
Real estate: (Home)			
(Other)			
Automobiles			
Other personal property			
Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
Other			
Check here if additional pages are attached.			
Total Assets (add next column)	\$		

B. LIABILITIES:

DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). 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
Mortgages on real estate: First mortgage on home	\$		
Second mortgage on home			
Other mortgages			
Auto loans			
Charge/credit card accounts			
Other			

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
Check here if additional pages are attached.			
Total Debts (add next column)	\$		

C. CONTINGENT ASSETS AND LIABILITIES:

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

Contingent Assets Check the line next to any contingent asset(s) which you are requesting the judge award to you.	Possible Value	Nonmarital (check correct column)	
		husband	wife
	\$		
Total Contingent Assets	\$		

Contingent Liabilities Check the line next to any contingent debt(s) for which you believe you should be responsible.	Possible Amount Owed	Nonmarital (check correct column)	
		husband	wife
	\$		
Total Contingent Liabilities	\$		

SECTION IV. CHILD SUPPORT GUIDELINES WORKSHEET

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

[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 PALM BEACH

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 SUPREME COURT APPROVED FAMILY LAW FORM 12.902(d),
UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA) AFFIDAVIT
(12/10)**

When should this form be used?

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

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

What should I do next?

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

Where can I look for more information?

Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms. The words that are in bold underline in these instructions are defined there. For further information, see sections 61.501-61.542, Florida Statutes.

Special notes...

Chapter 2008-61, Laws of Florida, effective October 1, 2008, eliminated such terms as custodial parent, noncustodial parent, primary residential parent, secondary residential parent, and visitation from Chapter 61, Florida Statutes. Instead, parents are to develop a Parenting Plan that includes, among other things, their time-sharing schedule with the minor child(ren). If the parents cannot agree, a parenting plan will be established by the Court. However, because the UCCJEA uses the terms custody and visitation, they are included in this form.

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

Case No.: _____
Division: _____

Self Service Packet #22A Page - 19 -

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # ____:

Child's Full Legal Name: _____

Place of Birth: _____ Date of Birth: _____ Sex: _____

Child's Residence for the past 5 years:

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

THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # ____:

Child's Full Legal Name: _____

Place of Birth: _____ Date of Birth: _____ Sex: _____

Child's Residence for the past 5 years:

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

Florida Supreme Court Approved Family Law Form 12.902(d), Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit (12/10)

2. Participation in custody or time-sharing proceeding(s):

[Choose only one]

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

____ I HAVE participated as a party, witness, or in any capacity in any other litigation or custody proceeding in this or another state, concerning custody of or time-sharing with a child subject to this proceeding. Explain:

- a. Name of each child: _____
- b. Type of proceeding: _____
- c. Court and state: _____
- d. Date of court order or judgment (if any): _____

3. Information about custody or time-sharing proceeding(s):

[Choose only one]

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

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

- a. Name of each child: _____
- b. Type of proceeding: _____
- c. Court and state: _____
- d. Date of court order or judgment (if any): _____

4. Persons not a party to this proceeding:

[Choose only one]

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

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

- a. Name and address of person: _____

() has physical custody () claims custody rights () claims visitation or time-sharing

Name of each child: _____

- b. Name and address of person: _____

() has physical custody () claims custody rights () claims visitation. or time-sharing

Name of each child: _____

- c. Name and address of person: _____

() has physical custody () claims custody rights () claims visitation or time-sharing

Name of each child: _____

Knowledge of prior child support proceedings:

[Choose only one]

- ___ The child(ren) described in this affidavit are NOT subject to existing child support order(s) in this or any state or territory.
- ___ The child(ren) described in this affidavit are subject to the following existing child support order(s):
- a. Name of each child:
 - b. Type of proceeding:
 - c. Court and address:
 - d. Date of court order/judgment (if any):
 - e. Amount of child support paid and by whom: _____

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

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

Other party or his/her attorney:

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

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

Dated: _____

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

STATE OF FLORIDA

COUNTY OF PALM BEACH

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

NOTARY PUBLIC or DEPUTY CLERK

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

___ Personally known

___ Produced identification

Type of identification produced _____

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

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

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:

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

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

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

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

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
5700.00	1089	1686	2109	2379	2597	2775
5750.00	1096	1695	2122	2393	2612	2791
5800.00	1102	1705	2134	2406	2627	2807
5850.00	1107	1713	2144	2418	2639	2820
5900.00	1111	1721	2155	2429	2651	2833
5950.00	1116	1729	2165	2440	2663	2847
6000.00	1121	1737	2175	2451	2676	2860
6050.00	1126	1746	2185	2462	2688	2874
6100.00	1131	1754	2196	2473	2700	2887
6150.00	1136	1762	2206	2484	2712	2900
6200.00	1141	1770	2216	2495	2724	2914
6250.00	1145	1778	2227	2506	2737	2927
6300.00	1150	1786	2237	2517	2749	2941
6350.00	1155	1795	2247	2529	2761	2954
6400.00	1160	1803	2258	2540	2773	2967
6450.00	1165	1811	2268	2551	2785	2981
6500.00	1170	1819	2278	2562	2798	2994
6550.00	1175	1827	2288	2573	2810	3008
6600.00	1179	1835	2299	2584	2822	3021
6650.00	1184	1843	2309	2595	2834	3034
6700.00	1189	1850	2317	2604	2845	3045
6750.00	1193	1856	2325	2613	2854	3055
6800.00	1196	1862	2332	2621	2863	3064
6850.00	1200	1868	2340	2630	2872	3074
6900.00	1204	1873	2347	2639	2882	3084
6950.00	1208	1879	2355	2647	2891	3094
7000.00	1212	1885	2362	2656	2900	3103
7050.00	1216	1891	2370	2664	2909	3113
7100.00	1220	1897	2378	2673	2919	3123
7150.00	1224	1903	2385	2681	2928	3133
7200.00	1228	1909	2393	2690	2937	3142
7250.00	1232	1915	2400	2698	2946	3152
7300.00	1235	1921	2408	2707	2956	3162
7350.00	1239	1927	2415	2716	2965	3172
7400.00	1243	1933	2423	2724	2974	3181
7450.00	1247	1939	2430	2733	2983	3191
7500.00	1251	1945	2438	2741	2993	3201
7550.00	1255	1951	2446	2750	3002	3211
7600.00	1259	1957	2453	2758	3011	3220
7650.00	1263	1963	2461	2767	3020	3230
7700.00	1267	1969	2468	2775	3030	3240
7750.00	1271	1975	2476	2784	3039	3250
7800.00	1274	1981	2483	2792	3048	3259
7850.00	1278	1987	2491	2801	3057	3269
7900.00	1282	1992	2498	2810	3067	3279
7950.00	1286	1998	2506	2818	3076	3289
8000.00	1290	2004	2513	2827	3085	3298
8050.00	1294	2010	2521	2835	3094	3308
8100.00	1298	2016	2529	2844	3104	3318
8150.00	1302	2022	2536	2852	3113	3328

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
8200.00	1306	2028	2544	2861	3122	3337
8250.00	1310	2034	2551	2869	3131	3347
8300.00	1313	2040	2559	2878	3141	3357
8350.00	1317	2046	2566	2887	3150	3367
8400.00	1321	2052	2574	2895	3159	3376
8450.00	1325	2058	2581	2904	3168	3386
8500.00	1329	2064	2589	2912	3178	3396
8550.00	1333	2070	2597	2921	3187	3406
8600.00	1337	2076	2604	2929	3196	3415
8650.00	1341	2082	2612	2938	3205	3425
8700.00	1345	2088	2619	2946	3215	3435
8750.00	1349	2094	2627	2955	3224	3445
8800.00	1352	2100	2634	2963	3233	3454
8850.00	1356	2106	2642	2972	3242	3464
8900.00	1360	2111	2649	2981	3252	3474
8950.00	1364	2117	2657	2989	3261	3484
9000.00	1368	2123	2664	2998	3270	3493
9050.00	1372	2129	2672	3006	3279	3503
9100.00	1376	2135	2680	3015	3289	3513
9150.00	1380	2141	2687	3023	3298	3523
9200.00	1384	2147	2695	3032	3307	3532
9250.00	1388	2153	2702	3040	3316	3542
9300.00	1391	2159	2710	3049	3326	3552
9350.00	1395	2165	2717	3058	3335	3562
9400.00	1399	2171	2725	3066	3344	3571
9450.00	1403	2177	2732	3075	3353	3581
9500.00	1407	2183	2740	3083	3363	3591
9550.00	1411	2189	2748	3092	3372	3601
9600.00	1415	2195	2755	3100	3381	3610
9650.00	1419	2201	2763	3109	3390	3620
9700.00	1422	2206	2767	3115	3396	3628
9750.00	1425	2210	2772	3121	3402	3634
9800.00	1427	2213	2776	3126	3408	3641
9850.00	1430	2217	2781	3132	3414	3647
9900.00	1432	2221	2786	3137	3420	3653
9950.00	1435	2225	2791	3143	3426	3659
10000.00	1437	2228	2795	3148	3432	3666

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH 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: _____

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
1. 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.			
2. 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.			
3. 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.	%	%	
4. 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.			
Additional Support — Health Insurance, Child Care & Other			
5. a. 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. Total Monthly Child(ren)'s Health Insurance Cost [This is only amounts actually paid for health insurance on the child(ren).]			
c. Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs			
d. Total Monthly Child Care & Health Costs [Add lines 5a + 5b +5c].			

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
6. Additional Support Payments Multiply the number on line 5d by the percentage on line 3A to determine the Father's share. Enter answer on line 6A. Multiply the number on line 5d by the percentage on line 3B to determine the Mother's share. Enter answer on line 6B.			
Statutory Adjustments/Credits			
7. a. Monthly child care payments actually made			
b. Monthly health insurance payments actually made			
c. 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)			
8. Total Support Payments actually made (Add 7a through 7c)			
9. MINIMUM CHILD SUPPORT OBLIGATION FOR EACH PARENT [Line 4 plus line 6; minus line 8]			
Substantial 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			
	A. FATHER	B. MOTHER	TOTAL
10. Basic Monthly Obligation x 150% [Multiply line 2 by 1.5]			
11. Increased Basic Obligation for each parent. Multiply the number on line 10 by the percentage on line 3A to determine the Father's share. Enter answer on line 11A. Multiply the number on line 10 by the percentage on line 3B to determine the Mother's share. Enter answer on line 11B.			
12. Percentage of overnight stays with each parent. The child(ren) spend(s) _____ overnight stays with the Father each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12A. The child(ren) spend(s) _____ overnight stays with the Mother each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12B.	%	%	

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
13. 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.]			
Additional Support — Health Insurance, Child Care & Other			
14. a. 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. Total Monthly Child(ren)'s Health Insurance Cost [This is only amounts actually paid for health insurance on the child(ren).]			
c. Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs.			
d. Total Monthly Child Care & Health Costs [Add lines 14a + 14b + 14c.]			
15. Additional Support Payments. 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.			
Statutory Adjustments/Credits			
16. a. Monthly child care payments actually made			
b. Monthly health insurance payments actually made			
c. 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]			
17. Total Support Payments actually made [Add 16a through 16c]			
18. Total Additional Support Transfer Amount [Line 15 minus line 17; enter any negative number as zero]			

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
19. Total Child Support Owed from Father to Mother [Add line 13A plus line 18A]			
20. Total Child Support Owed from Mother to Father [Add line 13B plus line 18B]			
21. Actual Child Support to Be Paid. [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]

- ____ 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.
- ____ 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 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 FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH 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 PALM BEACH

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

When should this form be used?

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

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

What should I do next?

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

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms. The words that are in “**bold underline**” in these instructions are defined there. For further information, see sections 61.052 and 61.13, Florida Statutes.

Special notes...

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

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

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH COUNTY, FLORIDA

Case No.: _____
Division: _____

_____,
Petitioner,

and

_____,
Respondent.

NOTICE OF SOCIAL SECURITY NUMBER

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

[✓ one only]

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

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

{Attach additional pages if necessary.}

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

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

Dated: _____

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

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


NOTARY PUBLIC or DEPUTY CLERK

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

____ Personally known

____ Produced identification

Type of identification produced _____

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

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

**IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT
IN AND FOR PALM BEACH COUNTY, FLORIDA**

Case No: _____

Division: _____

Petitioner,

and

Respondent.

MOTION FOR MEDIATION

I, [write your name], the [circle one] Petitioner / Respondent, move the court to enter an Order Appointing a Certified Family Law Mediator to mediate this cause and to order the parties to submit to mediation, and as grounds would state as follows:

1. Pursuant to the Florida Statutes and the Florida Family Law Rules of Procedure, the parties should attempt in good faith to resolve their disputes in family law cases by means of mediation.

2. A motion for Court Ordered Mediation is being requested because: [√ only a or b]

a. Prior to initiating any action, we are required to first submit the issue(s) to pre-filing Mediation.

b. There is a pending action in this case. That action is for:

 Dissolution Paternity Modification Adoption

 Other more particularly described as: _____

3. I would like to mediate the following matters which I have not been able to resolve with the other party and which are in dispute: [√ all that apply]

 Parenting Plan and/or Time-Sharing Child support
 Property Distribution Alimony Costs Relocation
 Other _____

4. Our **combined** annual income **“Gross (before taxes)”** is: **[Choose one]**

 Less than \$50,000 (Each party will be required to pay \$60.00 for Mediation Fees)
 More than \$50,000 (Each party will be required to pay \$120.00 for Mediation Fees)
 More than \$100,000 (Parties must utilize private mediation. When utilizing a private mediator, payment shall be shared equally by the parties, unless otherwise ordered by the Court.)

***Note: If a party has been found to be indigent, that party shall bring a copy of the Determination of Indigent Status or appropriate court order to the ADR office, in which case the fee will be waived for that party.**

5. I believe that there is a good possibility that most or all issues could be settled amicably by mediation for the benefit of the minor child(ren).

6. Is there a history of Family/Domestic Violence between the parties?

☐ No
☐ Yes

7. Is there an **Injunction/No Contact Order** in effect?

☐ No
☐ Yes Case #: _____ Jurisdiction/Circuit _____

8. Is there a Related **Child Support Order** in place?

☐ No
☐ Yes Case #: _____ Jurisdiction/Circuit _____

***Note: A copy of the Judgment of Support must be provided to the mediator at the time of Mediation.**

WHEREFORE, I *[your name]* _____ the, *[circle one]* Petitioner / Respondent, respectfully move this Court for the entry of an Order directing the parties to submit to mediation before the Certified Family Law Mediator appointed by the Court and further determining how the mediator is to be paid.

I **HEREBY CERTIFY** that a true and correct copy of the foregoing Motion for Mediation was () mailed () faxed and mailed () E- mailed () hand delivered to the person(s) listed below on {date} _____.

Other party or his/her attorney:

Name: _____
Address: _____
City, State, Zip: _____
Email: _____

Dated: _____


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

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

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

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.924,
NOTICE FOR TRIAL

When should this form be used?

Generally, the court will have trials (or final hearings) on contested cases. This form is to be used to notify the court that your case is ready to be set for trial. Before setting your case for trial, certain requirements such as completing mandatory disclosure and filing certain papers and having them served on the other party must be met. These requirements vary depending on the type of case and the procedures in your particular circuit. In some circuits you must complete mediation or a parenting course before you can set a final hearing by using a Notice of Hearing (General),  Florida Supreme Court Approved Family Law Form 12.923, or other appropriate notice of hearing form. Other circuits may require that you set the trial using an Order Setting Trial. Contact the clerk of the circuit court, family law intake staff, or judicial assistant to determine how the judge assigned to your case sets trials. For further information, you should refer to the instructions for the type of form you are filing.

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.

What should I do next?


A copy of this form must be mailed or hand delivered to the other party in your case.

Where can I look for more information?

Before proceeding, you should read A General Information for Self-Represented Litigants found at the beginning of these forms. For further information, see rule 12.440, Florida Family Law Rules of Procedure.

Special notes...

These family law forms contain orders and final judgments, which the judge may use. You should ask the clerk of court, family law intake staff, or judicial assistant if you need to bring one of these forms with you to the hearing or trial. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

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 FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH COUNTY, FLORIDA

Case No.: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent.

NOTICE FOR TRIAL

Pursuant to rule 12.440, Florida Family Law Rules of Procedure, the party signing below states that the case is ready to be set for trial. The estimated time needed for the parties to present their cases is: {hours} _____.

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

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

Dated: _____

Signature of Party

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

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

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

“If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Germaine English, Americans with Disabilities Act Coordinator, Palm Beach County Courthouse, 205 North Dixie Highway West Palm Beach, Florida 33401; telephone number (561) 355-4380 at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.”

“Si usted es una persona minusválida que necesita algún acomodamiento para poder participar en este procedimiento, usted tiene derecho, sin tener gastos propios, a que se le provea cierta ayuda. Tenga la amabilidad de ponerse en contacto con Germaine English, 205 N. Dixie Highway, West Palm Beach, Florida 33401; teléfono número (561) 355-4380, por lo menos 7 días antes de la cita fijada para su comparecencia en los tribunales, o inmediatamente después de recibir esta notificación si el tiempo antes de la comparecencia que se ha programado es menos de 7 días; si usted tiene discapacidad del oído o de la voz, llame al 711.”

“Si ou se yon moun ki enfim ki bezwen akomodasyon pou w ka patisipe nan pwosedi sa, ou kalifye san ou pa gen okenn lajan pou w peye, gen pwovizyon pou jwen kèk èd. Tanpri kontakte Germaine English, kòddonatè pwogram Lwa pou ameriken ki Enfim yo nan Tribinal Konte Palm Beach la ki nan 205 North Dixie Highway, West Palm Beach, Florida 33401; telefòn li se (561) 355-4380 nan 7 jou anvan dat ou gen randevou pou parèt nan tribinal la, oubyen imedyatman apre ou fin resevwa konvokasyon an si lè ou gen pou w parèt nan tribinal la mwens ke 7 jou; si ou gen pwoblèm pou w tande oubyen pale, rele 711.”

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.900(a), DISCLOSURE FROM NONLAWYER (11/12)

When should this form be used?

This form must be used when anyone who is **not** a lawyer in good standing with The Florida Bar helps you complete any Florida Family Law Form. Attorneys who are licensed to practice in other states but not Florida, or who have been disbarred or suspended from the practice of law in Florida, are nonlawyers for the purposes of the Florida Family Law Forms and instructions.

The nonlawyer must complete this form and both of you are to sign it before the nonlawyer assists you in completing any Family Law Form.

In addition, on any other form with which a nonlawyer helps you, the nonlawyer shall complete the nonlawyer section located at the bottom of the form unless otherwise specified in the instructions to the form. This is to protect you and be sure that you are informed in advance of the nonlawyer's limitations.

What should I do next?

A copy of this disclosure, signed by both the nonlawyer and the person, must be given to the person to retain and the nonlawyer must keep a copy in the person's file. The nonlawyer shall also keep copies for at least 6 years of all forms given to the person being assisted.

Special Notes

This disclosure form does **NOT** act as or constitute a waiver, disclaimer, or limitation of liability.

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner,

and

Respondent.

DISCLOSURE FROM NONLAWYER

{Name} _____ told me that he/she is a nonlawyer and may not give legal advice, cannot tell me what my rights or remedies are, cannot tell me how to testify in court, and cannot represent me in court.

Rule 10-2.1(b) of the Rules Regulating The Florida Bar defines a paralegal as a person who works under the supervision of a member of The Florida Bar and who performs specifically delegated substantive legal work for which a member of The Florida Bar is responsible. Only persons who meet the definition may call themselves paralegals. {Name} _____, informed me that he/she is not a paralegal as defined by the rule and cannot call himself/herself a paralegal.

{Name} _____, told me that he/she may only type the factual information provided by me in writing into the blanks on the form. Except for typing, {name} _____, may not tell me what to put in the form and may not complete the form for me. However, if using a form approved by the Supreme Court of Florida, {name} _____, may ask me factual questions to fill in the blanks on the form and may also tell me how to file the form.

[choose one only]

_____ I can read English.

_____ I cannot read English, but this disclosure was read to me [fill in both blanks] by
{name} _____ in {language} _____, which I understand.

Dated: _____

Signature of Party

Signature of **NONLAWYER**

Printed Name: _____

Name of Business: _____

Address: _____

Telephone Number: _____



E-SERVICE INSTRUCTIONS FOR SELF REPRESENTED PARTIES

Pursuant to the Florida Rule of Judicial Administration 2.516, self-represented parties involved in any type of case in any Florida court, may, but are not required to, serve on the opposing party's attorney court documents by e-mail.

E-mail Service to/from an Opposing Party: Self-represented parties opting to serve court documents by e-mail may do so by designating a primary e-mail address (and up to 2 secondary e-mail addresses) for receiving service in that proceeding. This designation only informs the other side of your email address. Once a party has filed an e-mail address designation in a proceeding, all court documents required or permitted to be served on a party must be served by e-mail unless the parties otherwise agree or a court orders otherwise.

E-Mail Service from Participating Judges: Self-represented parties who want to receive court orders and other court documents from judges who use e-mail service **MUST** register with the 15th Judicial Circuit's online services system at **www.15thcircuit.com/html/online services**. You will NOT receive court documents from participating judges unless and until you register with the 15th Judicial Circuit's online system.

Form of Email: E-mail service is made by attaching a copy of the document to be served in PDF format to an e-mail. The e-mail's subject line must state "SERVICE OF COURT DOCUMENT" in all capital letters, followed by the case number of the relevant proceeding. The body of the e-mail must identify the: (1) court in which the proceeding is pending; (2) case number; (3) name of the initial party on each side; (3) title of each document served with that e-mail; (4) sender's name; (5) sender's telephone number. The e-mail and attachments together may not exceed 5 megabytes in size; e-mails that exceed the size requirement must be divided into separate e-mails (no one of which may exceed 5 megabytes) and labeled sequentially in the subject line. Documents served by e-mail may be signed by "/s/", "/s" or "s/" as long as the document filed with the Clerk's Office is signed in accordance with the applicable rule of procedure.

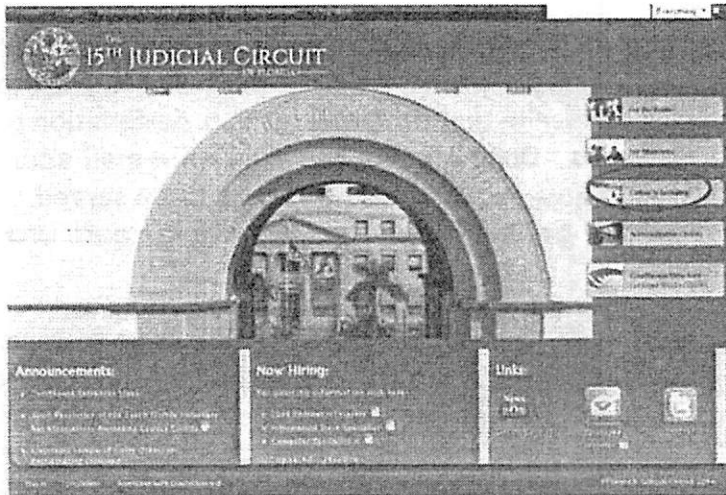
Service Dates: Service by e-mail is deemed complete on the date it is sent. E-mail service is treated as service by mail for the computation of time. When, in addition to service by e-mail, the sender also utilizes another means of service provided for in the Rules of Judicial Administration, the computation of time will be based on the method of service that has the shortest response time.

Filing of Documents: The Rules of Judicial Administration require that all documents be filed with the court either before service on the opposing party or immediately thereafter. Documents are deemed filed when they are filed with the clerk of court. If the sender learns that the e-mail did not reach the address of the person to be served, the sender must immediately send another copy by e-mail, or serve by a means authorized by subdivision (b)(2) of the Rules of Judicial Administration.

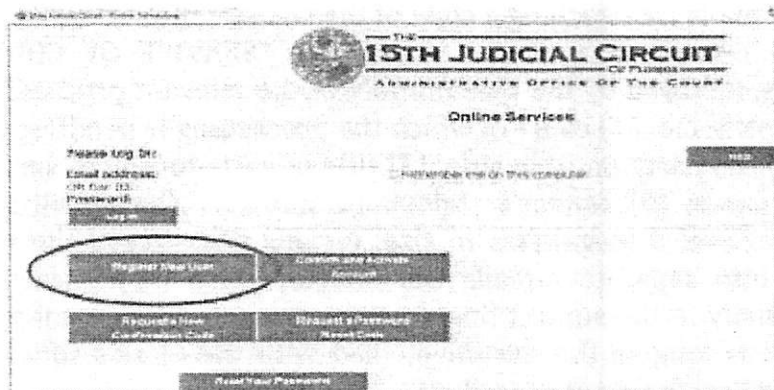


THE
15TH JUDICIAL CIRCUIT
OF FLORIDA
ADMINISTRATIVE OFFICE OF THE COURT

Instructions for E-Service Registration For Self Represented Litigants

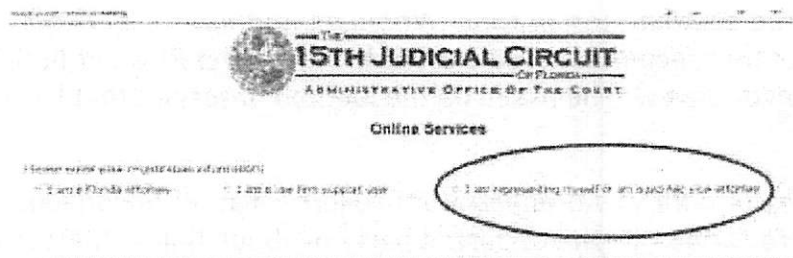


- Go to www.15thcircuit.com
- Select Online Scheduling
- Select Online Scheduling Application



This will take you to the Log In Screen.

First time users click on "Register New User".



Select the "Pro se/ Pro hac vice" button

Enter the information requested in the fields provided.

NOTE:

The e-mail address listed here is for logging into Court e-service applications. This address is NOT FOR USE as an e-service email address unless you want it to be.

Simply type the code in the space provided and press the green submit button.

The account has now been created.
A confirmation email will be sent to registered login email address.

IMPORTANT:

The user **MUST** accept and login within 24 hours.

IN THE CIRCUIT/COUNTY COURT OF THE FIFTEENTH JUDICIAL CIRCUIT
IN AND FOR PALM BEACH COUNTY, FLORIDA

CASE NO.: _____

_____,
Plaintiff/Petitioner

v.

_____,
Defendant/Respondent.

**DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS AND
DIRECTIONS TO PROVIDE E-MAIL ADDRESS TO COURT ADMINISTRATION**

I, (full legal name) _____, being sworn, certify that my
current mailing address is: {Street} _____

{City} _____, {State} _____, {Zip} _____

{Telephone No.} _____ {Fax No.} _____

I designate as my current e-mail address(es) (up to 3 different email address): _____

1. I understand that in order to receive court orders from participating judicial divisions in the Fifteenth Judicial Circuit/Palm Beach County, I must register my email address with Court Administration by going to www.15thcircuit.com/html/online services.
2. I further understand that simply listing an email address on this form will NOT inform the judge or case manager of my email address and that I MUST register on line with the Court's online e-registration system.
3. Once registered, I agree to accept email service of court orders or documents sent by the court.
4. By completing this form I am authorizing participating Judicial Divisions and the Court of the Clerk, of the Fifteenth Judicial Circuit Court of Florida to send copies of orders/judgment, notices or other written communications to me by e-mail and not through regular U.S. Mail.
5. 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.
6. I will ensure the software filters have been removed from my computer, so it does not interfere with my ability to receive any of the above documents.

Designation of Current Mailing and E-Mail Address and Directions to Provide E-mail Address to Court Administration (04/13)

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): _____

Dated: _____

Signature of Party

STATE OF FLORIDA
COUNTY OF PALM BEACH

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} _____ {telephone number} _____

Designation of Current Mailing and E-Mail Address and Directions to Provide E-mail Address to Court Administration (04/13)

INSTRUCTIONS FOR NOTICE OF CHANGE OF ADDRESS

When should this form be used?

This form should be used when a you make any changes to your mailing/e-mailing address at anytime during the course of the case.

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 the petition was filed and keep a copy for your records.

What should I do next?

A copy of this form must be mailed or hand delivered to the other party in your case.

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 742, Florida Statutes.

Special notes...

It is the party’s responsibility to timely update their address. If you do not update your address timely, you may not receive documents filed in your case.

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH COUNTY, FLORIDA

Case No.: _____
Division: _____

Plaintiff/Petitioner,

V.

Defendant/Respondent.

NOTICE OF CHANGE ADDRESS

Please be advised that the undersigned has changed their mailing address to:

Address: _____

City: _____

State: _____

Zip code: _____

Phone Number: _____

Please be advised that the undersigned has changed his/her email address to the following:

Email Address: _____

Signature

Printed Name

CERTIFICATE OF SERVICE

I certify that a copy of this document was mailed to the person listed below by U.S. Mail on the following date: _____.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Signature