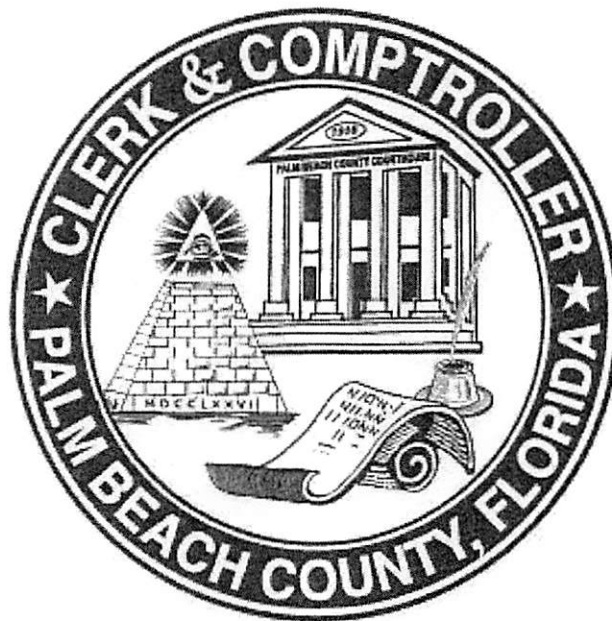


**Sharon R. Bock**  
**CLERK & COMPTROLLER**  
**SELF SERVICE CENTER**

**Your Guide Through The Courts**



**Packet #63**

*Revised 09/2014*

**SUPPLEMENTAL PETITION TO PERMIT  
RELOCATION WITH MINOR  
CHILD(REN)**

**NON-REFUNDABLE**

**(130 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](http://www.mypalmbeachclerk.com)  
(561) 655-8944  
(561) 687-3266  
Revised 05/2013

# SUPPLEMENTAL PETITION TO PERMIT RELOCATION WITH MINOR CHILD(REN)

## Packet # 63

### When should this form be used?

This form should be used when you are asking the court to permit the relocation of the principal residence of the petitioner with minor child(ren).

<b>The Petitioner must complete and file the following forms: (see instruction on each form)</b>	<b>Page</b>
✓ Cover Sheet for Family Court Cases (Form 12.928), (11/13)	7
✓ Supplemental Petition to Permit Relocation with Child(ren)(09/10),12.950(d)	12
✓ Notice of Related Cases 12.900(h), (11/13)	16
✓ Family Law Financial Affidavit (Short Form) 12.902(b) (income less than \$50,000), (09/12)	22
✓ Family Law Financial Affidavit (Long Form) 12.902(c) (income more than \$50,000). <b>By request only.</b>	
✓ Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit 12.902(d)	29
✓ Child Support Guidelines Worksheet 12.902(e), (09/12) <i>(If you do not know your spouse's income, you may file this worksheet after his or her financial affidavit has been served on you.)</i>	40
✓ Notice of Social Security Number 12.902(j) <i>(if not previously filed)</i>	46
✓ Summons: Personal Service on an Individual 12.910(a), (09/12)	51
✓ Process Service Memorandum 12.910(b)	56
✓ Affidavit of Military Service 12.912(b)	58
✓ Relocation/Long Distance Parenting Plan, Form 12.995(c) <i>(If the parents have reached an agreement, a signed and notarized Parenting Plan should be attached. If the parents have not reached an agreement, a Proposed Parenting Plan may be filed.)</i>	63
✓ Notice for Trial, <u><i>(You must file this form for a final hearing to be set),</i></u>	78

### **These forms should be completed and filed, IF APPLICABLE**

✓ Memorandum for Certificate of Military Service 12.912(a) <i>(if needed)</i>	81
✓ Certificate of Compliance with Mandatory Disclosure 12.932, (09/12) <i>(This must be filed within 45 days of <u>service</u> of the supplemental petition on the respondent, if not filed at the time of the supplemental petition, unless you and the other party have agreed not to exchange these documents.)</i>	85
✓ Notice of Action 12.913(a)(2) <i>(Only if you are publishing/cannot find other parent)</i>	90
✓ Affidavit of Diligent Search and Inquiry 12.913(b) <i>(Only if other parent cannot be found) (11/12)</i>	93
✓ Motion for Default 12.922(a) <i>(if other party does not file an answer)</i>	97
✓ Motion for Mediation (02/14) <i>(Must file if there is no signed agreement on all issues)</i>	98
✓ Agreement for Relocation with Minor Child(ren) 12.950(a)	103
✓ Disclosure from Nonlawyer 12.900(a), (11/12) <i>(use only if someone not an attorney helped you fill out the forms)</i>	118
✓ Joint Pretrial Statement <i>( to be used when the parties are unable to come to an agreement on some or all issues and the judge must make a decision)</i>	119
✓ Designation of Current Mailing and E-Mail Address and Directions to Provide E-Mail Address to Court Administration, A.O. 2.310, (04/13)	127
✓ Notice of Change of Address, (09/14) <u><i>(Must be filed whenever you change your address)</i></u>	130

### **Fees:**

Filing fee	\$ 50.00*
Summons Issue fee payable to Sharon R. Bock, Clerk & Comptroller, Palm Beach County	\$ 10.00*
Sheriff Service fee: (payable to <u>PBSO</u> by check or money order)	\$ 40.00
<i>If the Respondent resides outside of Palm Beach County, it is <u>YOUR RESPONSIBILITY</u> to contact the Sheriff's Office of that county in order to have the Respondent served with the proper documents.</i>	
Constructive Service (Publication - Only if your spouse cannot be found)	\$ 194.00**
<b>Mediation fees <u>per person</u>:</b>	
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.

**\*\*Money Order only Made Payable to PBDBR**

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 the other party.
- The petitioner should file the originals with the Clerk & Comptroller's office and pay the filing fee. 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 cannot 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 FAMILY LAW RULES OF PROCEDURE FORM 12.928, COVER SHEET FOR FAMILY COURT CASES (11/13)**

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

The Cover Sheet for Family Court Cases and the information contained in it neither replace nor supplement the filing and service of pleadings or other documents as required by law. This form shall be filed by the petitioner/party opening or reopening a case for the use of the clerk of the circuit court for the purpose of reporting judicial workload data pursuant to Florida Statutes section 25.075.

This form should be typed or printed in black ink. The petitioner must file this cover sheet with the first pleading or motion filed to open or reopen a case in all domestic and juvenile cases.

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

Follow these instructions for completing the form:

- I. Case Style. Enter the name of the court, the appropriate case number assigned at the time of filing of the original petition, the name of the judge assigned (if applicable), and the name (last, first, middle initial) of the petitioner(s) and respondent(s).
- II. Type of Action /Proceeding. Place a check beside the proceeding you are initiating. If you are simultaneously filing more than one type of proceeding against the same opposing party, such as a modification and an enforcement proceeding, complete a separate cover sheet for each action being filed.
  - (A) Initial Action/Petition
  - (B) Reopening Case. If you check "Reopening Case," indicate whether you are filing a modification or supplemental petition or an action for enforcement by placing a check beside the appropriate action/petition.
    1. Modification/Supplemental Petition
    2. Motion for Civil Contempt/ Enforcement
    3. Other – All reopening actions not involving modification/supplemental petitions or petition enforcement.
- III. Type of Case. Place a check beside the appropriate case. If the case fits more than one category, select the most definitive. Definitions of the categories are provided below.
  - (A) Simplified Dissolution of Marriage- petitions for the termination of marriage pursuant to Florida Family Law Rule of Procedure 12.105.
  - (B) Dissolution of Marriage - petitions for the termination of marriage pursuant to Chapter 61, Florida Statutes, other than simplified dissolution.
  - (C) Domestic Violence - all matters relating to injunctions for protection against domestic violence pursuant to section 741.30, Florida Statutes.
  - (D) Dating Violence - all matters relating to injunctions for protection against dating violence pursuant to section 784.046, Florida Statutes.
  - (E) Repeat Violence - all matters relating to injunctions for protection against repeat violence pursuant to section 784.046, Florida Statutes.
  - (F) Sexual Violence - all matters relating to injunctions for protection against sexual violence pursuant to section 784.046, Florida Statutes.
  - (G) Stalking-all matters relating to injunctions for protection against stalking pursuant to section 784.0485, Florida Statutes.

- (H) Support - IV-D - all matters relating to child or spousal support in which an application for assistance has been filed with the Department of Revenue, Child Support Enforcement under Title IV-D, Social Security Act, except for such matters relating to dissolution of marriage petitions (sections 409.2564, 409.2571, and 409.2597, Florida Statutes), paternity, or UIFSA.
- (I) Support-Non IV-D - all matters relating to child or spousal support in which an application for assistance has **not** been filed under Title IV-D, Social Security Act.
- (J) UIFSA- IV-D - all matters relating to Chapter 88, Florida Statutes, in which an application for assistance has been filed under Title IV-D, Social Security Act.
- (K) UIFSA - Non IV-D - all matters relating to Chapter 88, Florida Statutes, in which an application for assistance has **not** been filed under Title IV-D, Social Security Act.
- (L) Other Family Court - all matters involving time-sharing and/or parenting plans relating to minor child(ren), support unconnected with dissolution of marriage, annulment, delayed birth certificates pursuant to Florida Statutes section 382.0195, expedited affirmation of parental status pursuant to Florida Statutes section 742.16, termination of parental rights proceedings pursuant to Florida Statutes section 63.087, declaratory judgment actions related to premarital, marital, post-marital agreements, or other matters not included in the categories above.
- (M) Adoption Arising Out Of Chapter 63 - all matters relating to adoption pursuant to Chapter 63, Florida Statutes, excluding any matters arising out of Chapter 39, Florida Statutes.
- (N) Name Change - all matters relating to name change, pursuant to section 68.07, Florida Statutes.
- (O) Paternity/Disestablishment of Paternity – all matters relating to paternity pursuant to Chapter 742, Florida Statutes.
- (P) Juvenile Delinquency - all matters relating to juvenile delinquency pursuant to Chapter 985, Florida Statutes.
- (Q) Petition for Dependency - all matters relating to petitions for dependency.
- (R) Shelter Petition – all matters relating to shelter petitions pursuant to Chapter 39, Florida Statutes.
- (S) Termination of Parental Rights Arising Out Of Chapter 39 – all matters relating to termination of parental rights pursuant to Chapter 39, Florida Statutes.
- (T) Adoption Arising Out Of Chapter 39 – all matters relating to adoption pursuant to Chapter 39, Florida Statutes.
- (U) CINS/FINS – all matters relating to children in need of services (and families in need of services) pursuant to Chapter 984, Florida Statutes.

**ATTORNEY OR PARTY SIGNATURE.** Sign the Cover Sheet for Family Court Cases. Print legibly the name of the person signing the Cover Sheet for Family Court Cases. Attorneys must include a Florida Bar number. Insert the date the Cover Sheet for Family Court Cases is signed. Signature is a certification that filer has provided accurate information on the Cover Sheet for Family Court Cases.

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

### **Where can I look for more information?**

**Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms.** For further information, see Rule 12.100, Florida Family Law Rules of Procedure.

Instructions for Florida Family Law Rules of Procedure Form 12.928, Cover Sheet for Family Court Cases (11/13)

# COVER SHEET FOR FAMILY COURT CASES

## I. Case Style

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

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

Judge: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

and

\_\_\_\_\_  
Respondent

II. Type of Action/Proceeding. Place a check beside the proceeding you are initiating. If you are simultaneously filing more than one type of proceeding against the same opposing party, such as a modification and an enforcement proceeding, complete a separate cover sheet for each action being filed. If you are reopening a case, choose one of the three options below it.

- (A) \_\_\_\_ Initial Action/Petition
- (B) \_\_\_\_ Reopening Case
  - 1. \_\_\_\_ Modification/Supplemental Petition
  - 2. \_\_\_\_ Motion for Civil Contempt/Enforcement
  - 3. \_\_\_\_ Other

III. Type of Case. If the case fits more than one type of case, select the most definitive.

- (A) \_\_\_\_ Simplified Dissolution of Marriage
- (B) \_\_\_\_ Dissolution of Marriage
- (C) \_\_\_\_ Domestic Violence
- (D) \_\_\_\_ Dating Violence
- (E) \_\_\_\_ Repeat Violence
- (F) \_\_\_\_ Sexual Violence
- (G) \_\_\_\_ Stalking
- (H) \_\_\_\_ Support IV-D (Department of Revenue, Child Support Enforcement)
- (I) \_\_\_\_ Support Non-IV-D (not Department of Revenue, Child Support Enforcement)
- (J) \_\_\_\_ UIFSA IV-D (Department of Revenue, Child Support Enforcement)
- (K) \_\_\_\_ UIFSA Non-IV-D (not Department of Revenue, Child Support Enforcement)
- (L) \_\_\_\_ Other Family Court
- (M) \_\_\_\_ Adoption Arising Out Of Chapter 63
- (N) \_\_\_\_ Name Change
- (O) \_\_\_\_ Paternity/Disestablishment of Paternity
- (P) \_\_\_\_ Juvenile Delinquency
- (Q) \_\_\_\_ Petition for Dependency
- (R) \_\_\_\_ Shelter Petition
- (S) \_\_\_\_ Termination of Parental Rights Arising Out Of Chapter 39
- (T) \_\_\_\_ Adoption Arising Out Of Chapter 39
- (U) \_\_\_\_ CINS/FINS

Florida Family Law Rules of Procedure Form 12.928, Cover Sheet for Family Court Cases (11/13)

IV. Rule of Judicial Administration 2.545(d) requires that a Notice of Related Cases Form, Family Law Form 12.900(h), be filed with the initial pleading/petition by the filing attorney or self-represented litigant in order to notify the court of related cases. Is Form 12.900(h) being filed with this Cover Sheet for Family Court Cases and initial pleading/petition?

\_\_\_\_ No, to the best of my knowledge, no related cases exist.

\_\_\_\_ Yes, all related cases are listed on Family Law Form 12.900(h).

#### ATTORNEY OR PARTY SIGNATURE

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief.

Signature \_\_\_\_\_ FL Bar No.: \_\_\_\_\_  
Attorney or party (Bar number, if attorney)

\_\_\_\_\_  
(Type or print name)

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

\_\_\_\_\_  
Date

**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  
12.950(d), SUPPLEMENTAL PETITION TO PERMIT RELOCATION WITH MINOR  
CHILD(REN) (09/10)**

**When should this form be used?**

This form should be used when you are asking the court to permit the relocation of the principal residence of the petitioner if:

1. You plan to relocate your residence more than 50 miles from your principal residence at the time of entry of the last order which established or modified primary residence, custody, visitation, or time-sharing;
2. The court has not entered an order granting permission to relocate.
3. The relocation will be for a period of 60 consecutive days or more, not including any absence for purposes of vacation, education, or health care for the child(ren).
4. Your order regarding custody, primary residence, visitation, time-sharing or parenting plan was entered before October 1, 2009 and the order does not expressly govern the relocation of the child(ren); was entered on or after October 1, 2006; or your case was pending on October 1, 2009.

This form should be typed or printed in black ink. You must fill in all sections of the form. After completing the form, you should sign the form before a notary public or deputy clerk. You should file this form in the county where the original order was entered. If the order was entered in another state, or if the child(ren) live(s) in another state, you should speak with an attorney about where to file this form. You should file the original with the clerk of the circuit court and keep a copy for your records.

**What should I do next?**

For your case to proceed, you must properly notify the other parent and every other person entitled to, access, time-sharing, or visitation with the child(ren) in your case of the supplemental petition. "Other Person" means an individual who is not the parent but with whom the child resides pursuant to court order, or who has the right of access to, time-sharing with, or visitation with the child(ren). If you know where he or she lives, you should use personal service. If you absolutely do not know where he or she lives, you may use constructive service. You may also be able to use constructive service if the other party resides in another state or country. However, if constructive service is used, the court may only grant limited relief. For more information on constructive service, see Notice of Action for Dissolution of Marriage, Florida Supreme Court Approved Family Law Form 12.913(a), and Affidavit of Diligent Search and Inquiry, Florida Family Law Rules of Procedure Form 12.913(b). If the other party is in the military service of the United States, additional steps for service may be required. See, for example, Memorandum for Certificate of Military Service, Florida Supreme Court Approved Family Law Form 12.912(a). The law regarding constructive service and service on an individual in the military service is very complex. If you have any questions about service, you may wish to consult an attorney regarding these issues.

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

**DEFAULT...** If after 20 days, no answer has been filed, you may file a Motion for Default, Florida Supreme Court Approved Family Law Form 12.922(a), with the clerk of court. Then, if you have filed all of the required papers, you may call the clerk, family law intake staff, or judicial assistant to set a final hearing. You must notify 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.

*Instructions for Florida Supreme Court Approved Family Law Form 12.950(d), Supplemental Petition to Permit Relocation with Child(ren)(09/10)*

**UNCONTESTED...** If the respondent files either an answer that agrees with everything in your supplemental petition or an answer and waiver, and you have complied with mandatory disclosure and filed all of the required papers, you may call the clerk, family law intake staff, or judicial assistant to set a final hearing. You must notify 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 the respondent files either an answer or an answer and counterpetition, which disagrees with or denies anything in your supplemental petition, and you are unable to settle the disputed issues, you should file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, after you have complied with mandatory disclosure and filed all of the required papers. Some circuits may require the completion of mediation before a final hearing may be set. Then you should contact the clerk, family law intake staff, or judicial assistant for instructions on how to set your case for trial (final hearing). If the respondent files an answer and counterpetition, you should answer the counterpetition within 20 days using an **Answer to Counterpetition**, Florida Supreme Court Approved Family Law Form 12.903(d).

### Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms. The words that are in “bold underline” in these instructions are defined there. For further information, see chapter 61, Florida Statutes.

### Special notes...

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

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

With this form, you must also file the following:

- ✓ **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d).
- ✓ **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e). (If you do not know the other party's income, you may file this worksheet after his or her financial affidavit has been served on you.)
- ✓ **Agreement for Relocation**, if you have reached an agreement on any or all of the issues attach the proposed Agreement For Relocation with Minor Child(ren). Florida Supreme Court Approved Family Law 12.950(a). Both parties must sign this agreement before a notary public. Any issues on which you are unable to agree will be considered contested and settled by the judge at the final hearing.
- ✓ **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).
- ✓ **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 the respondent, if not filed at the time of the supplemental petition, unless you and the other party have agreed not to exchange these documents.)

**Updating Information.** A parent or other person seeking to relocate has a continuing duty to provide current and updated information required by the relocation statute when that information becomes known.

**Parenting and Time-Sharing...** If you and the other parent and every other person entitled to access to or time-sharing with the child(ren) are unable to agree on the 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 a time-sharing schedule based upon 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).

**Failure to obtain an Order prior to relocation renders the supplemental petition to relocate legally insufficient.**

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.

If one has not already been completed, the court may require the completion of a parenting course before a final hearing is set. You should contact the clerk, family law intake staff, or judicial assistant about requirements for parenting courses or mediation where you live.

**Child Support...** The court may order one parent to pay child support to assist the other parent in meeting the child(ren)'s material needs. **Both parents are required to provide financial support**, but one parent may be ordered to pay a portion of his or her support for the child(ren) to the other parent. 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 relocation of the minor child(ren), complete paragraph eleven contained in the Supplemental Petition To Permit Relocation of Minor Child(ren).

**Final Judgment Form...** These family law forms contain a **Final Judgment/Supplemental Final Judgment Permitting Relocation**, Florida Supreme Court Approved Family Law Form 12.950(i), which the judge may use. You should check with the clerk, family law intake staff, or judicial assistant to see if you need to bring it 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.

*Instructions for Florida Supreme Court Approved Family Law Form 12.950(d), Supplemental Petition to Permit Relocation with Child(ren)(09/10)*

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

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

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

And

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

**SUPPLEMENTAL PETITION TO PERMIT RELOCATION WITH MINOR CHILD(REN)**

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

1. The parties to this action were granted a final judgment of ( ) dissolution of marriage ( ) paternity on {date} \_\_\_\_\_. A copy of the final judgment and any modification(s) is/are attached to this supplemental petition.
2. {If applicable} The following other person is an individual who is not a parent but with whom the child resides pursuant to court order, or who has the right of access to, time-sharing with, or visitation with the child(ren) \_\_\_\_\_.
3. Paragraph(s) \_\_\_\_\_ of the ( ) final judgment or ( ) most recent modification thereof describes the present custody, visitation, and/or time-sharing ordered.
4. The parties \_\_\_\_\_ have \_\_\_\_\_ have not reached an agreement on relocation. If yes, a copy of the agreement is attached to this supplemental petition.
5. The parties' dependent or minor child(ren) is (are):

**Name**

**Birth Date**

_____	_____
_____	_____
_____	_____
_____	_____

6. Since the final judgment or last modification thereof, there has been a substantial change in circumstances, requiring a modification of the present visitation or time-sharing schedule because I seek to relocate my principal residence at least 50 miles from my principal residence. Pursuant to Section 61.13001(3), Florida Statutes, the following information is provided:
  - a. The location of the intended new residence, including the state, city, and physical address, (if known), is: \_\_\_\_\_



b. The mailing address of the new physical residence, if not the same as the physical address, is:

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c. The home telephone number of the intended new residence, (if known), is: \_\_\_\_\_

d. The date of the intended move or proposed relocation is: \_\_\_\_\_

7. The specific reasons for the proposed relocation are: \_\_\_\_\_

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Attach additional sheets if necessary.

8. One of the reasons for the proposed relocation is a job offer. [Choose only **one**] ( ) Yes ( ) No. The job offer is in writing. [Choose only **one**] ( ) Yes ( ) No. A copy of the written job offer is attached to this supplemental petition.

9. I ask the Court to modify access and time-sharing as follows:

---

---

---

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10. This modification is in the best interests of the child(ren) because: *{explain}* \_\_\_\_\_

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11. If the requested modification is granted, Petitioner requests that child support be modified, consistent with the modification of visitation or time-sharing. A Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), is, or will be filed. [Choose only **one**] ( ) Yes ( ) No.

12. I am requesting a temporary relief hearing to permit relocation prior to the final hearing. [Choose only **one**] ( ) Yes ( ) No. If yes, explain why you cannot wait for a final hearing date.

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**Failure to obtain an Order prior to relocation renders the supplemental petition to relocate legally insufficient.**

13. A completed **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c), is, or will be, filed.
14. A completed **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d), is filed with this petition.
15. 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 petition.
16. Other: \_\_\_\_\_

A RESPONSE TO THE SUPPLEMENTAL PETITION OBJECTING TO RELOCATION MUST BE MADE IN WRITING, FILED WITH THE COURT, AND SERVED ON THE PARENT OR OTHER PERSON SEEKING TO RELOCATE WITHIN 20 DAYS AFTER SERVICE OF THIS SUPPLEMENTAL PETITION TO RELOCATE. IF YOU FAIL TO TIMELY OBJECT TO THE RELOCATION, THE RELOCATION WILL BE ALLOWED, UNLESS IT IS NOT IN THE BEST INTERESTS OF THE CHILD, WITHOUT FURTHER NOTICE AND WITHOUT A HEARING.

A response is in the form of an Answer and it must be sworn to under oath and must include the specific factual basis supporting the reasons for objecting to the relocation, including a statement of the amount of participation or involvement you currently have or have had in the life of the child(ren).

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

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

\_\_\_\_\_  
Signature of PETITIONER

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

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

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

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

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

STATE OF FLORIDA

COUNTY OF 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]**

I, {full legal name and trade name of nonlawyer} \_\_\_\_\_,  
a nonlawyer, whose address is {street} \_\_\_\_\_, {city} \_\_\_\_\_,  
{state} \_\_\_\_\_, {phone} \_\_\_\_\_, helped {name} \_\_\_\_\_, who is  
the petitioner, fill out this form.

Supplemental Petition to Permit Relocation with Child(ren)(09/10) 12.950(d)

Self Service Packet # 63 Page - 14 -

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

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

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

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

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

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

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

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

### **Where can I look for more information?**

**Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms.** The words that are in "**bold underline**" in these instructions are defined there. For further information, see Florida Rule of Judicial Administration 2.545(d).

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

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

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

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

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

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

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

**NOTICE OF RELATED CASES**

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

[check one only]

☐ There are no related cases.

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

**Related Case No. 1**

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

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

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

Type of Proceeding: [check all that apply]

☐ Dissolution of Marriage

☐ Paternity

☐ Custody

☐ Adoption

☐ Child Support

☐ Modification/Enforcement/Contempt Proceedings

☐ Juvenile Dependency

☐ Juvenile Delinquency

☐ Termination of Parental Rights

☐ Criminal

☐ Domestic/Sexual/Dating/Repeat

☐ Mental Health

Violence or Stalking Injunctions

☐ Other {specify} \_\_\_\_\_

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

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): \_\_\_\_\_  
Title of last Court Order/Judgment (if any): \_\_\_\_\_  
Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases [check all that apply]:

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

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

**Related Case No. 2**

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

Type of Proceeding: [check all that apply]

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

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

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): \_\_\_\_\_  
Title of last Court Order/Judgment (if any): \_\_\_\_\_  
Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases [check all that apply]:

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

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

**Related Case No. 3**

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

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

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

Type of Proceeding: [check all that apply]

\_\_\_\_ Dissolution of Marriage

\_\_\_\_ Paternity

\_\_\_\_ Custody

\_\_\_\_ Adoption

\_\_\_\_ Child Support

\_\_\_\_ Modification/Enforcement/Contempt Proceedings

\_\_\_\_ Juvenile Dependency

\_\_\_\_ Juvenile Delinquency

\_\_\_\_ Termination of Parental Rights

\_\_\_\_ Criminal

\_\_\_\_ Domestic/Sexual/Dating/Repeat

\_\_\_\_ Mental Health

Violence or Stalking Injunctions

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

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

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

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

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

Relationship of cases [check all that apply]:

\_\_\_\_ Pending case involves same parties, children, or issues;

\_\_\_\_ may affect court's jurisdiction;

\_\_\_\_ Order in related case may conflict with an order in this case;

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

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

\_\_\_\_\_

\_\_\_\_\_

2. [check one only]

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

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

\_\_\_\_\_

\_\_\_\_\_

3. [check all that apply]

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

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

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

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

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

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

## CERTIFICATE OF SERVICE

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

\_\_\_\_\_  
Signature of Petitioner/Attorney for Petitioner  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address(es): \_\_\_\_\_  
Florida Bar Number: \_\_\_\_\_

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

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

This form was completed with the assistance of:

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

# **INSTRUCTIONS FOR FLORIDA 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	=	<b>Monthly Amount</b>

**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	=	<b>Monthly Amount</b>

**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	=	<b>Monthly Amount</b>

**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	=	<b>Monthly Amount</b>

**Semi-monthly** - If you are paid twice per month, you may convert your income to monthly as follows:

Semi-monthly amount	x	2	=	<b>Monthly Amount</b>
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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)

**SECTION II. AVERAGE MONTHLY EXPENSES****A. HOUSEHOLD:**

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

**B. AUTOMOBILE**

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

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

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

**D. INSURANCE**

Medical/Dental \$ \_\_\_\_\_  
 Child(ren)'s medical/dental \$ \_\_\_\_\_  
 Life \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ \$ \_\_\_\_\_

**E. OTHER EXPENSES NOT LISTED ABOVE**

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

**F. PAYMENTS TO CREDITORS**

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

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

**SUMMARY**

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

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

31. \$ \_\_\_\_\_ **SURPLUS** (If line 29 is more than line 30, subtract line 30 from line 29. This is the amount of your surplus. Enter that amount here.)

32. (\$ \_\_\_\_\_) **(DEFICIT)** (If line 30 is more than line 29, subtract line 29 from line 30. This is the amount of your deficit. Enter that amount here.)

**SECTION III. ASSETS AND LIABILITIES**

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

<b>DESCRIPTION OF ITEM(S).</b> List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). <b>LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS.</b> Check the line next to any asset(s) which you are requesting the judge award to you.		<b>Current Fair Market Value</b>	<b>Nonmarital (check correct column)</b>	
			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.			
<b>Total Assets (add next column)</b>		\$		

<b>DESCRIPTION OF ITEM(S).</b> List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). <b>LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS.</b> Check the line next to any debt(s) for which you believe you should be responsible.		<b>Current Amount Owed</b>	<b>Nonmarital (check correct column)</b>	
			<b>husband</b>	<b>wife</b>
	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.			
<b>Total Debts</b> (add next column)	\$		

**C. CONTINGENT ASSETS AND LIABILITIES:**

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

Contingent Assets 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
	\$		
<b>Total Contingent Assets</b>	\$		

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
	\$		
<b>Total Contingent Liabilities</b>	\$		

**SECTION IV. CHILD SUPPORT GUIDELINES WORKSHEET**

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

[Check one only]

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

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

I certify that a copy of this document was [check all used]: ( ) e-mailed ( ) mailed ( ) faxed ( ) hand delivered to the person(s) listed below on {date} \_\_\_\_\_.

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

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

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

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

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

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

*Florida Supreme Court Approved Family Law Form 12.902(d), Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit (12/10)*  
*Self Service Packet # 63 Page - 29 -*

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

**5. 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: \_\_\_\_\_

**6. 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:

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

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

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

### CHILD SUPPORT GUIDELINES CHART

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
800.00	190	211	213	216	218	220
850.00	202	257	259	262	265	268
900.00	213	302	305	309	312	315
950.00	224	347	351	355	359	363
1000.00	235	365	397	402	406	410
1050.00	246	382	443	448	453	458
1100.00	258	400	489	495	500	505
1150.00	269	417	522	541	547	553
1200.00	280	435	544	588	594	600
1250.00	290	451	565	634	641	648
1300.00	300	467	584	659	688	695
1350.00	310	482	603	681	735	743
1400.00	320	498	623	702	765	790
1450.00	330	513	642	724	789	838
1500.00	340	529	662	746	813	869
1550.00	350	544	681	768	836	895
1600.00	360	560	701	790	860	920
1650.00	370	575	720	812	884	945
1700.00	380	591	740	833	907	971
1750.00	390	606	759	855	931	996
1800.00	400	622	779	877	955	1022
1850.00	410	638	798	900	979	1048
1900.00	421	654	818	923	1004	1074
1950.00	431	670	839	946	1029	1101
2000.00	442	686	859	968	1054	1128
2050.00	452	702	879	991	1079	1154
2100.00	463	718	899	1014	1104	1181
2150.00	473	734	919	1037	1129	1207
2200.00	484	751	940	1060	1154	1234
2250.00	494	767	960	1082	1179	1261
2300.00	505	783	980	1105	1204	1287
2350.00	515	799	1000	1128	1229	1314
2400.00	526	815	1020	1151	1254	1340
2450.00	536	831	1041	1174	1279	1367
2500.00	547	847	1061	1196	1304	1394
2550.00	557	864	1081	1219	1329	1420
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



Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
3050.00	654	1016	1271	1433	1563	1671
3100.00	663	1031	1289	1453	1586	1695
3150.00	673	1045	1308	1474	1608	1720
3200.00	682	1060	1327	1495	1631	1744
3250.00	691	1075	1345	1516	1654	1769
3300.00	701	1090	1364	1537	1677	1793
3350.00	710	1105	1382	1558	1700	1818
3400.00	720	1120	1401	1579	1723	1842
3450.00	729	1135	1419	1599	1745	1867
3500.00	738	1149	1438	1620	1768	1891
3550.00	748	1164	1456	1641	1791	1915
3600.00	757	1179	1475	1662	1814	1940
3650.00	767	1194	1493	1683	1837	1964
3700.00	776	1208	1503	1702	1857	1987
3750.00	784	1221	1520	1721	1878	2009
3800.00	793	1234	1536	1740	1899	2031
3850.00	802	1248	1553	1759	1920	2053
3900.00	811	1261	1570	1778	1940	2075
3950.00	819	1275	1587	1797	1961	2097
4000.00	828	1288	1603	1816	1982	2119
4050.00	837	1302	1620	1835	2002	2141
4100.00	846	1315	1637	1854	2023	2163
4150.00	854	1329	1654	1873	2044	2185
4200.00	863	1342	1670	1892	2064	2207
4250.00	872	1355	1687	1911	2085	2229
4300.00	881	1369	1704	1930	2106	2251
4350.00	889	1382	1721	1949	2127	2273
4400.00	898	1396	1737	1968	2147	2295
4450.00	907	1409	1754	1987	2168	2317
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

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
5400.00	1051	1628	2037	2297	2507	2679
5450.00	1057	1638	2049	2311	2522	2695
5500.00	1064	1647	2061	2324	2537	2711
5550.00	1070	1657	2073	2338	2552	2727
5600.00	1077	1667	2085	2352	2567	2743
5650.00	1083	1676	2097	2365	2582	2759
5700.00	1089	1686	2109	2379	2597	2775
5750.00	1096	1695	2122	2393	2612	2791
5800.00	1102	1705	2134	2406	2627	2807
5850.00	1107	1713	2144	2418	2639	2820
5900.00	1111	1721	2155	2429	2651	2833
5950.00	1116	1729	2165	2440	2663	2847
6000.00	1121	1737	2175	2451	2676	2860
6050.00	1126	1746	2185	2462	2688	2874
6100.00	1131	1754	2196	2473	2700	2887
6150.00	1136	1762	2206	2484	2712	2900
6200.00	1141	1770	2216	2495	2724	2914
6250.00	1145	1778	2227	2506	2737	2927
6300.00	1150	1786	2237	2517	2749	2941
6350.00	1155	1795	2247	2529	2761	2954
6400.00	1160	1803	2258	2540	2773	2967
6450.00	1165	1811	2268	2551	2785	2981
6500.00	1170	1819	2278	2562	2798	2994
6550.00	1175	1827	2288	2573	2810	3008
6600.00	1179	1835	2299	2584	2822	3021
6650.00	1184	1843	2309	2595	2834	3034
6700.00	1189	1850	2317	2604	2845	3045
6750.00	1193	1856	2325	2613	2854	3055
6800.00	1196	1862	2332	2621	2863	3064
6850.00	1200	1868	2340	2630	2872	3074
6900.00	1204	1873	2347	2639	2882	3084
6950.00	1208	1879	2355	2647	2891	3094
7000.00	1212	1885	2362	2656	2900	3103
7050.00	1216	1891	2370	2664	2909	3113
7100.00	1220	1897	2378	2673	2919	3123
7150.00	1224	1903	2385	2681	2928	3133
7200.00	1228	1909	2393	2690	2937	3142
7250.00	1232	1915	2400	2698	2946	3152
7300.00	1235	1921	2408	2707	2956	3162
7350.00	1239	1927	2415	2716	2965	3172
7400.00	1243	1933	2423	2724	2974	3181
7450.00	1247	1939	2430	2733	2983	3191
7500.00	1251	1945	2438	2741	2993	3201
7550.00	1255	1951	2446	2750	3002	3211
7600.00	1259	1957	2453	2758	3011	3220
7650.00	1263	1963	2461	2767	3020	3230
7700.00	1267	1969	2468	2775	3030	3240

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
7750.00	1271	1975	2476	2784	3039	3250
7800.00	1274	1981	2483	2792	3048	3259
7850.00	1278	1987	2491	2801	3057	3269
7900.00	1282	1992	2498	2810	3067	3279
7950.00	1286	1998	2506	2818	3076	3289
8000.00	1290	2004	2513	2827	3085	3298
8050.00	1294	2010	2521	2835	3094	3308
8100.00	1298	2016	2529	2844	3104	3318
8150.00	1302	2022	2536	2852	3113	3328
8200.00	1306	2028	2544	2861	3122	3337
8250.00	1310	2034	2551	2869	3131	3347
8300.00	1313	2040	2559	2878	3141	3357
8350.00	1317	2046	2566	2887	3150	3367
8400.00	1321	2052	2574	2895	3159	3376
8450.00	1325	2058	2581	2904	3168	3386
8500.00	1329	2064	2589	2912	3178	3396
8550.00	1333	2070	2597	2921	3187	3406
8600.00	1337	2076	2604	2929	3196	3415
8650.00	1341	2082	2612	2938	3205	3425
8700.00	1345	2088	2619	2946	3215	3435
8750.00	1349	2094	2627	2955	3224	3445
8800.00	1352	2100	2634	2963	3233	3454
8850.00	1356	2106	2642	2972	3242	3464
8900.00	1360	2111	2649	2981	3252	3474
8950.00	1364	2117	2657	2989	3261	3484
9000.00	1368	2123	2664	2998	3270	3493
9050.00	1372	2129	2672	3006	3279	3503
9100.00	1376	2135	2680	3015	3289	3513
9150.00	1380	2141	2687	3023	3298	3523
9200.00	1384	2147	2695	3032	3307	3532
9250.00	1388	2153	2702	3040	3316	3542
9300.00	1391	2159	2710	3049	3326	3552
9350.00	1395	2165	2717	3058	3335	3562
9400.00	1399	2171	2725	3066	3344	3571
9450.00	1403	2177	2732	3075	3353	3581
9500.00	1407	2183	2740	3083	3363	3591
9550.00	1411	2189	2748	3092	3372	3601
9600.00	1415	2195	2755	3100	3381	3610
9650.00	1419	2201	2763	3109	3390	3620
9700.00	1422	2206	2767	3115	3396	3628
9750.00	1425	2210	2772	3121	3402	3634
9800.00	1427	2213	2776	3126	3408	3641
9850.00	1430	2217	2781	3132	3414	3647
9900.00	1432	2221	2786	3137	3420	3653
9950.00	1435	2225	2791	3143	3426	3659
10000.00	1437	2228	2795	3148	3432	3666

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

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

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
d. Total Monthly Child Care & Health Costs [Add lines 5a + 5b +5c].			
6. Additional Support Payments Multiply the number on line 5d by the percentage on line 3A to determine the Father's share. Enter answer on line 6A. Multiply the number on line 5d by the percentage on line 3B to determine the Mother's share. Enter answer on line 6B.			
<b>Statutory Adjustments/Credits</b>			
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]			
<b>Substantial Time-Sharing (GROSS UP METHOD) If each parent exercises time-sharing at least 20 percent of the overnights in the year (73 overnights in the year), complete Nos. 10 through 21</b>			
	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.			

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
<b>12. Percentage of overnight stays with each parent.</b> The child(ren) spend(s) _____ overnight stays with the Father each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12A. The child(ren) spend(s) _____ overnight stays with the Mother each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12B.	%	%	
<b>13. Parent's support multiplied by other Parent's percentage of overnights.</b> [Multiply line 11A by line 12B. Enter this number in 13A. Multiply line 11B by line 12A. Enter this number in 13B.]			
<b>Additional Support — Health Insurance, Child Care &amp; Other</b>			
<b>14. a. Total Monthly Child Care Costs</b> [Child care costs should not exceed the level required to provide quality care from a licensed source. See section 61.30(7), Florida Statutes, for more information.]			
<b>b. Total Monthly Child(ren)'s Health Insurance Cost</b> [This is only amounts actually paid for health insurance on the child(ren).]			
<b>c. Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs.</b>			
<b>d. Total Monthly Child Care &amp; Health Costs</b> [Add lines 14a + 14b + 14c.]			
<b>15. Additional Support Payments.</b> Multiply the number on line 14d by the percentage on line 3A to determine the Father's share. Enter answer on line 15A. Multiply the number on line 14d by the percentage on line 3B to determine the Mother's share. Enter answer on line 15B.			
<b>Statutory Adjustments/Credits</b>			
<b>16. a. Monthly child care payments actually made</b>			
<b>b. Monthly health insurance payments actually made</b>			

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
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]			
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]

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

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

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

This form was completed with the assistance of:

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

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

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

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



INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.902(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: [x] fill in all blanks]**

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

# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.910(a), SUMMONS: PERSONAL SERVICE ON AN INDIVIDUAL (09/12)

## When should this form be used?

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

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

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

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

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

## How do I start?

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

**IF THE OTHER PARTY LIVES IN THE COUNTY WHERE SUIT IS FILED:** Ask the clerk in your county about any local procedures regarding service. Generally, if the other party lives in the county in which you are filing suit and you want the sheriff's department to serve the papers, you will file the summons along with a **Process Service Memorandum**, Florida Supreme Court Approved Family Law Form 12.910(b), with the clerk and the clerk will forward those papers to the sheriff for service. Make sure that you attach a copy of the papers you want personally served to the summons. You may also need to provide the sheriff with a stamped envelope addressed to you. This will allow the sheriff to send the proof of

Instructions for Florida Family Law Rules of Procedure Form 12.910(a), Summons: Personal Service on an Individual (09/12)

service to you, after the sheriff serves your papers on the other party. However, in some counties the sheriff may send the proof of service directly to the clerk. If you are instructed to supply a self-addressed, stamped envelope and you receive the proof of service, you should file the proof of service with the clerk after you receive it from the sheriff. Also, you will need to find out how much the sheriff charges to serve the papers. Personal checks are not accepted. You should attach to the summons a cashier's check or money order made payable to the sheriff, and either give it to the clerk for delivery to the sheriff or send all of the paperwork and the fee to the sheriff yourself. The clerk will tell you which procedure to use. The costs for service may be waived if you are indigent.

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

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

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

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

Instructions for Florida Family Law Rules of Procedure Form 12.910(a), Summons: Personal Service on an Individual (09/12)

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

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

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

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

#### **Where can I look for more information?**

**Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms.** For further information regarding service of process, see chapters 48 and 49, Florida Statutes, and rule 1.070, Florida Rules of Civil Procedure, as well as the instructions for **Notice of Action for Dissolution of Marriage (No Child or Financial Support)**, Florida Supreme Court Approved Family Law Form 12.913(a)(1), **Notice of Action for Family Cases with Minor Child(ren)**, Florida Supreme Court Approved Family Law Form 12.913(a)(2), **Affidavit of Diligent Service and Inquiry**, Florida Family Law Rules of Procedure Form 12.913(b), and **Affidavit of Diligent Search**, Florida Family Law Rules of Procedure Form 12.913(c).

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

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

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

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

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

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

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

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

and

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

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

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

**IMPORTANT**

A lawsuit has been filed against you. You have **20 calendar days** after this summons is served on you to file a written response to the attached complaint/petition with the clerk of this circuit court, located at: {street address} \_\_\_\_\_.

A phone call will not protect you. Your written response, including the case number given above and the names of the parties, must be filed if you want the Court to hear your side of the case.

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

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

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

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

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

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

Florida Family Law Rules of Procedure Form 12.910(a), Summons: Personal Service on an Individual (09/12)

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

**“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.”**

## **IMPORTANTE**

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

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

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

Nombre y dirección de la parte que entrega la orden de comparecencia: \_\_\_\_\_

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

Usted debe de mantener informada a la oficina del Secretario de Juzgado del Circuito de su dirección actual. (Usted puede presentar \_\_\_\_\_ el Formulario: Ley de Familia de la Florida 12.915, Florida Supreme Court Approved Family Law Form 12.915, Designation of Current Mailing and E-mail Address.) Los papeles que se presenten en el futuro en esta demanda judicial serán enviados por correo a la dirección que este registrada en la oficina del Secretario.

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

Florida Family Law Rules of Procedure Form 12.910(a), Summons: Personal Service on an Individual (09/12)



**“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.”**

### **IMPORTANT**

Des poursuites judiciaires ont été entreprises contre vous. Vous avez 20 jours consécutifs à partir de la date de l'assignation de cette citation pour déposer une réponse écrite à la plainte ci-jointe auprès de ce tribunal. Qui se trouve à: {L'Adresse} \_\_\_\_\_. Un simple coup de téléphone est insuffisant pour vous protéger; vous êtes obligés de déposer votre réponse écrite, avec mention du numéro de dossier ci-dessus et du nom des parties nommées ici, si vous souhaitez que le tribunal entende votre cause. Si vous ne déposez pas votre réponse écrite dans le délai requis, vous risquez de perdre la cause ainsi que votre salaire, votre argent, et vos biens peuvent être saisis par la suite, sans aucun préavis ultérieur du tribunal. Il y a d'autres obligations juridiques et vous pouvez requérir les services immédiats d'un avocat. Si vous ne connaissez pas d'avocat, vous pourriez téléphoner à un service de référence d'avocats ou à un bureau d'assistance juridique (figurant à l'annuaire de téléphones).

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

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

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

Il faut aviser le greffier de votre adresse actuelle. (Vous pouvez déposer Florida Supreme Court Approved Family Law Form 12.915, Designation of Current Mailing and E-mail Address.) Les documents de l'avenir de ce procès seront envoyés à l'adresse que vous donnez au bureau du greffier.

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

**“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, kòòdonatè 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.”**

THE STATE OF FLORIDA

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

DATED: \_\_\_\_\_

CLERK OF THE CIRCUIT COURT

(SEAL)

By: \_\_\_\_\_  
Deputy Clerk

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.910(b),  
PROCESS SERVICE MEMORANDUM

**When should this form be used?**

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

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where your petition was filed and attach a copy to the **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a). You should also keep a copy for your records.

**Where can I look for more information?**

**Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms.** You should read the instructions for **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a), for additional information.

**Special notes...**

If this is a domestic violence case and you want to keep your address confidential for safety reasons, do not enter your address, telephone, and fax information at the bottom of this form. Instead, write "confidential" in the spaces provided for that information and 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 **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.

**PROCESS SERVICE MEMORANDUM**

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

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

in the above-styled cause upon:

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

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

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

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

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

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

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

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

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

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

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

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

**\* If this is a domestic violence case, do not enter this information if your address or telephone number need to be kept confidential for safety reasons; instead write "confidential" in the spaces provided and file Florida Supreme Court Approved Family Law Form 12.980(i), Petitioner's Request for Confidential Filing of Address.**

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

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

*Florida Supreme Court Approved Family Law Form 12.910(b), Process Service Memorandum (9/00)*

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM  
12.912(b), AFFIDAVIT OF MILITARY SERVICE (12/10)**

**When should this form be used?**

An Affidavit of Military Service is required in every case where the Respondent has not filed an answer or appearance. The purpose is to protect the men and women serving in the U.S. military from having a court judgment entered against them without first receiving notice of the lawsuit and a chance to defend the case.

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

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

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

**Special notes...**

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

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

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

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

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

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

**AFFIDAVIT OF MILITARY SERVICE**

I, {full legal name} \_\_\_\_\_, am the  
Petitioner in this case. To support my application for a default judgment and to comply with the Service  
members Civil Relief Act (formerly known as Soldiers' and Sailors' Civil Relief Act of 1940), I swear or  
affirm that the following information is true:  
[please choose only one]

1. \_\_\_\_ I know of my own personal knowledge that the Respondent **IS** on active duty in the military  
service of the United States.
2. \_\_\_\_ I know of my own personal knowledge that Respondent **IS NOT** now on active duty in the  
military service of the United States, nor has the Respondent been on active military service of  
the United States within a period of thirty (30) days immediately before this date. "Active  
Service" includes reserve members of the Army, Navy, Air Force, Coast Guard, and Marines who  
have been ordered to report for active duty and members of the Florida National Guard who  
have been ordered to report to active duty for a period of more than thirty (30) days.
3. \_\_\_\_ I have contacted the military services of the United States and the U.S. Public Health Service and  
have obtained certificates showing that the Respondent is not on active duty status. These  
certificates are attached.
4. \_\_\_\_ I have attempted to determine the military status of the Respondent, but do not have sufficient  
information. This is what I have done to determine whether or not Respondent is on active duty  
in the United States military:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

I have no reason to believe that s/he is on active duty at this time.

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

DATED: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

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

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

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

Telephone No: \_\_\_\_\_

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 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: [ ~~do~~ fill in all blanks]**

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

## INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.995(c), RELOCATION/LONG DISTANCE PARENTING PLAN (09/10)

### When should this form be used?

A **Parenting Plan** is required in all cases involving **time-sharing** with minor child(ren), even when time-sharing is not in dispute. The Parenting Plan must be developed and agreed to by the parents and every other person entitled to access or time-sharing with the child(ren) and approved by the court. "Other Person" means an individual who is not the parent, but with whom the child resides pursuant to court order, or who has the right of access to, time-sharing with or visitation with the child(ren). If the parties cannot agree to a Parenting Plan or if the parents agreed to a Plan that is not approved by the court, a Parenting Plan will be established by the court with or without the use of Parenting Plan Recommendations.

This form or a similar form should be used in the development of a Parenting Plan when you are planning to relocate your or the child(ren)'s principal residence more than 50 miles from the principal place of residence:

- at the time of the last order either establishing or modifying time-sharing, or
- at the time of filing the pending action to either establish or modify time-sharing

This form should be typed or printed in black ink. If an agreement has been reached, **both** parties must sign the Parenting Plan and have their signatures witnessed by a **notary public** or **deputy clerk**. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where the **petition** was filed and keep a copy for your records. You should then refer to the instructions for your petition, **answer**, or answer and **counterpetition** concerning the procedures for setting a hearing or **trial (final hearing)**. If an agreed Parenting Plan is not filed by the parties, the Court shall establish a Plan.

### Where can I look for more information?

Before proceeding, you should read "General Information for Self-Represented Litigants" found at the **beginning of these forms**. The words that are in "**bold underline**" in these instructions are defined there. For further information, see chapter 61, Florida Statutes, and the instructions for the petition and/or answer that were filed in this case.

### Special notes...

At a minimum, the **Relocation/Long Distance Parenting Plan** must describe in adequate detail:

- How the parties will share and be responsible for the daily tasks associated with the upbringing of the child(ren),
- The **time-sharing schedule** that specifies the time that the minor child(ren) will spend with each parent and every other person entitled to access or time-sharing,
- A designation of who will be responsible for any and all forms of health care, school-related matters, including the address to be used for school-boundary determination and registration, other activities,
- The methods and technologies that the parties will use to communicate with the child(ren), and

*Instructions for Florida Supreme Court Approved Family Law Form 12.995(c), Relocation/Long Distance Parenting Plan (09/10)*



- Any transportation arrangements related to access or time-sharing.

The best interests of the child(ren) is the primary consideration in the Parenting Plan. In creating the Parenting Plan, all circumstances between the parties, including the parties' historic relationship, domestic violence, and other factors must be taken into consideration. Determination of the best interests of the child(ren) shall be made by evaluating all of the factors affecting the welfare and interest of the particular minor child(ren) and the circumstances of the family as listed in section 61.13(3), Florida Statutes, including, but not limited to:

- The demonstrated capacity and disposition of each party to facilitate and encourage a close and continuing parent-child relationship, to honor the time-sharing schedule, and to be reasonable when changes are required;
- The anticipated division of parental responsibilities after the litigation, including the extent to which parental responsibilities will be delegated to third parties;
- The demonstrated capacity and disposition of each party to determine, consider, and act upon the needs of the child(ren) as opposed to the needs or desires of the parent;
- The length of time the child(ren) has lived in a stable, satisfactory environment and the desirability of maintaining continuity;
- The geographic viability of the parenting plan, with special attention paid to the needs of school-age children and the amount of time to be spent traveling to effectuate the parenting plan. This factor does not create a presumption for or against relocation of either party with a child(ren);
- The moral fitness of the parties;
- The mental and physical health of the parties;
- The home, school, and community record of the child(ren);
- The reasonable preference of the child(ren), if the court deems the child(ren) to be of sufficient intelligence, understanding, and experience to express a preference;
- The demonstrated knowledge, capacity, and disposition of each party to be informed of the circumstances of the minor child(ren), including, but not limited to, the child(ren)'s friends, teachers, medical care providers, daily activities, and favorite things;
- The demonstrated capacity and disposition of each party to provide a consistent routine for the child(ren), such as discipline, and daily schedules for homework, meals, and bedtime;
- The demonstrated capacity of each party to communicate with and keep the other part(y)ies informed of issues and activities regarding the minor child(ren), and the willingness of each party to adopt a unified front on all major issues when dealing with the child(ren);
- Evidence of domestic violence, sexual violence, child abuse, child abandonment, or child neglect, regardless of whether a prior or pending action relating to those issues has been brought. If the court accepts evidence of prior or pending actions regarding domestic violence, sexual violence, child abuse, child abandonment, or child neglect, the court must specifically acknowledge in writing that such evidence was considered when evaluating the best interests of the child(ren);
- Evidence that any party has knowingly provided false information to the court regarding any prior or pending action regarding domestic violence, sexual violence, child abuse, child abandonment, or child neglect;

*Instructions for Florida Supreme Court Approved Family Law Form 12.995(c), Relocation/Long Distance Parenting Plan (09/10)*

- The particular parenting tasks customarily performed by each party and the division of parental responsibilities before the institution of litigation and during the pending litigation, including the extent to which parenting responsibilities were undertaken by third parties;
- The demonstrated capacity and disposition of each party to participate and be involved in the child(ren)'s school and extracurricular activities;
- The demonstrated capacity and disposition of each party to maintain an environment for the child(ren) which is free from substance abuse;
- The capacity and disposition of each party to protect the child(ren) from the ongoing litigation as demonstrated by not discussing the litigation with the child(ren), not sharing documents or electronic media related to the litigation with the child(ren), and refraining from disparaging comments about any other party to the child(ren); and
- The developmental stages and needs of the child(ren) and the demonstrated capacity and disposition of each party to meet the child(ren)'s developmental needs.

This standard form does not include every possible issue that may be relevant to the facts of your case. The Parenting Plan should be as detailed as possible to address the time-sharing schedule. Additional provisions should be added to address all of the relevant factors. The parties should give special consideration to the age and needs of each child.

In developing the Parenting Plan, you may wish to consult or review other materials which are available at your local library, law library or through national and state family organizations.

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.

**RELOCATION/LONG-DISTANCE PARENTING PLAN**

This parenting plan is: (Choose only **one**)

- ☐ A Parenting Plan submitted to the court with the agreement of the parties.  
☐ A proposed Parenting Plan submitted by or on behalf of:  
*{Name of Parent or Other Person}* \_\_\_\_\_.  
☐ A Parenting Plan established by the court.

This parenting plan is: (Choose only **one**)

- ☐ A final Parenting Plan established by the court.  
☐ A temporary Parenting Plan established by the court.  
☐ A modification of a prior final Parenting Plan or prior final order.

**1. PARTIES**

**Mother**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Father**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Other Person {If Applicable}**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**2. CHILDREN:** This parenting plan is for the following child(ren):

*{Add additional lines as needed}*

**Name(s)**

**Birth Date(s)**


**3. JURISDICTION**

The United States is the country of habitual residence of the child(ren).

The State of Florida is the child(ren)'s home state for the purposes of the Uniform Child Custody Jurisdiction and Enforcement Act.

This Parenting Plan is a child custody determination for the purposes of the Uniform Child Custody Jurisdiction and Enforcement Act, the International Child Abduction Remedies Act, 42 U.S.C. Sections 11601 et seq., the Parental Kidnapping Prevention Act, and the Convention on the Civil Aspects of International Child Abduction enacted at the Hague on October 25, 1980, and for all other state and federal laws.

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

**4. PARENTAL RESPONSIBILITY AND DECISION MAKING**

**1. Parental Responsibility (Choose only one)**

☐ **Shared Parental Responsibility.**

It is in the best interests of the child(ren) that the parties confer and **jointly** make all major decisions affecting the welfare of the child(ren). Major decisions include, but are not limited to, decisions about the child(ren)'s education, healthcare, and other responsibilities unique to this family.

**OR**

☐ **Shared Parental Responsibility with Decision Making Authority**

It is in the best interests of the child(ren) that the parties confer and attempt to agree on the major decisions involving the child(ren). If the parties are unable to agree, the authority for making major decisions regarding the child(ren) shall be as follows:

Education/Academic decisions	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other Person
Non-emergency health care	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other Person
_____	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other Person
_____	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other Person
_____	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other Person

OR

☐ **Sole Parental Responsibility:**

It is in the best interests of the child(ren) that the ☐ Mother ☐ Father ☐ Other Person shall have sole authority to make major decisions for the child(ren.) It is detrimental to the child(ren) for the parties to share decision making.

**2. Day-to-Day Decisions**

Unless otherwise specified in this plan, each party shall make decisions regarding day-to-day care and control of each child, including the performance of daily tasks, while the child is with that party. Regardless of the allocation of decision making in the Parenting Plan, any party may make emergency decisions affecting the health or safety of the child(ren) when the child is residing with that party. A party who makes an emergency decision shall share the decision with the other party as soon as reasonably possible.

**3. Extracurricular Activities ( Choose all that apply)**

☐ Any party may register the child(ren) and allow them to participate in the activity of the child(ren)'s choice.

☐ The parties must mutually agree to all extracurricular activities.

☐ The party with the minor child(ren) shall transport the minor child(ren) to and/or from all mutually agreed upon extra-curricular activities, providing all necessary uniforms and equipment within the party's possession.

☐ The costs of the extracurricular activities shall be paid by:  
Mother \_\_\_\_\_% Father \_\_\_\_\_%

☐ The uniforms and equipment required for the extracurricular activities shall be paid by:  
Mother \_\_\_\_\_% Father \_\_\_\_\_%

☐ Other: \_\_\_\_\_.

**5. INFORMATION SHARING. Unless Otherwise Indicated or Ordered by the Court:**

1. Unless otherwise prohibited by law, the parties shall have access to medical and school records, and information pertaining to the child(ren), and shall be permitted to independently consult with any and all professionals involved with the child(ren). The parties shall cooperate with each other in sharing information related to the health, education, and welfare of the child(ren) and they shall sign any necessary documentation ensuring that all parties have access to said records.

2. Each party shall be responsible for obtaining records and reports directly from the school and health care providers.

3. The parties have equal rights to inspect and receive governmental agency and law enforcement records concerning the child(ren).
4. The parties shall have equal and independent authority to confer with the child(ren)'s school, day care, health care providers, and other programs with regard to the child(ren)'s educational, emotional, and social progress.
5. The parties shall be listed as "emergency contacts" for the child(ren).
6. Each party has a continuing responsibility to provide a residential and mailing address, and contact telephone number (s) to the other parties. Each party shall notify the other parties in writing within 24 hours of any changes. Each party shall notify the court in writing within seven (7) days of any changes.
7. Other: \_\_\_\_\_  
\_\_\_\_\_.

## 6. SCHEDULING

### 1. School Calendar

If necessary, on or before \_\_\_\_\_ of each year, the parties should obtain a copy of the school calendar for the next school year. The parties shall discuss the calendars and the time-sharing schedule so that any differences or questions can be resolved.

The parties shall follow the school calendar of: (Choose **all** that apply)

- ☐ the oldest child
- ☐ the youngest child
- ☐ the school calendar for \_\_\_\_\_ County
- ☐ the school calendar for \_\_\_\_\_ School

### 2. Academic Break Definition

When defining academic break periods, the period shall begin at the end of the last scheduled day of classes before the holiday or break and shall end on the first day of regularly scheduled classes after the holiday or break.

### 3. Schedule Changes (Choose **all** that apply)

- ☐ A party making a request for a schedule change will make the request as soon as possible, but in any event, except in cases of emergency, no less than \_\_\_\_\_ before the change is to occur.
- ☐ A party requesting a change of schedule shall be responsible for any additional child care, or transportation costs caused by the change.
- ☐ Other \_\_\_\_\_.

## 7. TIME-SHARING SCHEDULE

### 1. Weekday and Weekend Schedule

The following schedule shall apply beginning on \_\_\_\_\_ with the ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person and continue as follows:

#### A. The child(ren) shall spend time with the **Mother** on the following dates and times:

**WEEKENDS:** ☐ Every ☐ Every Other ☐ Other *{Specify}* \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**WEEKDAYS:** *{Specify days}* \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**OTHER:** *{Specify}* \_\_\_\_\_

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

#### B. The child(ren) shall spend time with the **Father** on the following dates and times:

**WEEKENDS:** ☐ Every ☐ Every Other ☐ Other *{Specify}* \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**WEEKDAYS:** *{Specify days}* \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**OTHER:** *{Specify}* \_\_\_\_\_

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

#### C. The child(ren) shall spend time with the **Other Person** *{If Applicable}* on the following dates and times:

**WEEKENDS:** ☐ Every ☐ Every Other ☐ Other *{Specify}* \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**WEEKDAYS:** *{Specify Days}* \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**OTHER:** *{Specify}* \_\_\_\_\_

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

#### D. Please indicate if there is a different time sharing schedule for any child. Complete a separate Attachment for each child for whom there is a different time sharing schedule.

☐ There is a different time-sharing schedule for the following child(ren) in Attachment \_\_\_\_\_.

\_\_\_\_\_, and \_\_\_\_\_.  
*{Name of Child}* *{Name of Child}*

### 2. Holiday Schedule (Choose only one)

☐ No holiday time sharing shall apply. The regular time-sharing schedule set forth above shall apply.

- ☐ Holiday time-sharing shall be as the parties agree.
- ☐ Holiday time-sharing shall be in accordance with the following schedule. The Holiday schedule will take priority over the regular weekday, weekend, and summer schedules. Fill in the blanks with Mother, Father, or {If Applicable} Other Person to indicate where the child(ren) will be for the holidays. Provide the beginning and ending times. If a holiday is not specified as even, odd, or every year with one party, then the child(ren) will remain with the other party in accordance with the regular schedule

<b>Holidays</b>	<b><u>Even Years</u></b>	<b><u>Odd Years</u></b>	<b><u>Every Year</u></b>	<b><u>Begin/End Time</u></b>
Mother's Day				
Father's Day				
President's Day				
Martin Luther King Day				
Easter				
Passover				
Memorial Day Weekend				
4 <sup>th</sup> of July				
Labor Day Weekend				
Columbus Day Weekend				
Halloween				
Thanksgiving				
Veteran's Day				
Hanukkah				
Yom Kippur				
Rosh Hashanah				
Child(ren)'s Birthdays				

This holiday schedule may affect the regular time-sharing schedule. Parties may wish to specify one or more of the following options:

- ☐ When the parties are using an alternating weekend plan and the holiday schedule would result in one party having the child(ren) for three weekends in a row, the parties will exchange the following weekend, so that each has two weekends in a row before the regular alternating weekend pattern resumes.
- ☐ If a party has the child(ren) on a weekend immediately before or after an unspecified holiday or non-school day, they shall have the child(ren) for the holiday or non-school day.

### **3. Winter Break**

A. Winter Break (Choose only one)



☐ The ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person shall have the child(ren) from the day and time school is dismissed until December \_\_\_\_ at \_\_\_\_ a.m./p. m in ☐ odd-numbered years ☐ even-numbered years ☐ every year. The other party will have the child(ren) for the second portion of the Winter Break. The parties shall alternate the arrangement each year.

☐ The ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person shall have the child(ren) for the entire Winter Break during ☐ odd-numbered years ☐ even-numbered years ☐ every year

☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. Specific Winter Holidays**

If not addressed above, the specific Winter Holidays such as Christmas, New Year's Eve, Hanukkah, Kwanzaa, etc. shall be shared as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**4. Spring Break (Choose only one)**

☐ The parties shall follow the regular schedule.

☐ The parties shall alternate the entire Spring Break with the ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person having the child(ren) during the ☐ odd-numbered ☐ even-numbered years

☐ The ☐ Father ☐ Mother ☐ *{If Applicable}* Other Person shall have the child(ren) for the entire Spring Break every year.

☐ The Spring Break will be evenly divided. The first half of the Spring Break will go to the party whose regularly scheduled weekend falls on the first half and the second half going to the party whose weekend falls during the second half.

☐ Other: \_\_\_\_\_.

**5. Summer Break (Choose only one)**

☐ The parents shall follow the regular schedule through the summer.

☐ The ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person shall have the entire Summer Break from \_\_\_\_\_ after school is out until \_\_\_\_\_ before school starts.

☐ The parties shall equally divide the Summer Break as follows:

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☐ Other: \_\_\_\_\_

**6. Number of Overnights:**

Based upon the time-sharing schedule, the Mother has a total of \_\_\_\_\_ overnights per year, the Father has a total of \_\_\_\_\_ overnights per year and *{If Applicable}* the Other Person has a total of \_\_\_\_\_ overnights per year. **Note: The total of these numbers must equal 365.**

7. ☐ **If not set forth above**, the parties shall have time-sharing in accordance with the schedule which is attached as Attachment \_\_\_\_\_ and incorporated herein.

**VIII. TRANSPORTATION AND EXCHANGE OF CHILD(REN)**

The parties shall have the child(ren) ready on time with sufficient clothing packed and ready at the agreed upon time of exchange. All necessary information and medicines will accompany the child(ren).

The parties shall exchange travel information and finalize travel plans at least \_\_\_\_\_ days in advance of the date of travel. Except in cases of emergency, any party requesting a change of travel plans after the date of finalization shall be solely responsible for any additional costs.

**1. Automobile Transportation and Exchange (Choose only one)**

If a party is more than \_\_\_\_\_ minutes late without contacting the other party to make other arrangements, the party with the child(ren) may proceed with other plans and activities.

☐ The ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person shall provide all transportation.

☐ The ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person shall pick up the child(ren) at the beginning of the visit and the other party shall pick up the child(ren) at the end of the visit. The exchange shall take place:

☐ At the parties' homes unless otherwise agreed

☐ At the following location unless the parties agree in advance to a different location: \_\_\_\_\_.

☐ The parties shall meet at the following central location: \_\_\_\_\_.

☐ Other: \_\_\_\_\_.

## 2. Airplane and Other Public Transportation and Exchange

Airline regulations govern the age at which a child may fly unescorted. An older child or children may fly under such regulations as each airline may establish.

Airline reservations should be made well in advance and preferably, non-stop or direct.

All flight information shall be sent to the other party(ies) at least \_\_\_\_ days in advance of the flight by the party purchasing the tickets.

If the child(ren) are flying accompanied by a party, the party picking up the child(ren) shall exchange the child(ren) with the other party at \_\_\_\_\_ and the party returning the child(ren) shall exchange the children at \_\_\_\_\_.  
If the exchange is to be made at the airport, the party flying in to pick up or drop off the child(ren) from/to the airport must notify the other party of any flight delays.

Unless otherwise agreed in advance, the party taking the child(ren) to the airport must call the other party(ies) immediately upon departure to notify the other party(ies) that the child(ren) is/are arriving, and the party who meets the child(ren) must immediately notify the other party(ies) upon the child(ren)'s arrival.

☐ Until a child reaches the age of \_\_\_\_\_, the parties agree that the child(ren) shall take a direct flight and/or fly accompanied by: \_\_\_\_\_.

☐ Once a child reaches the age of \_\_\_\_\_, the child shall be permitted to fly accompanied by an airline employee.

☐ Once a child reaches the age of \_\_\_\_\_, the child shall be permitted to fly unescorted.

☐ Other: \_\_\_\_\_.

## 3. Costs of Airline and Other Public Transportation (Choose all that apply)

☐ Ticket Purchase *{If Applicable}*:  
The parties shall work together to purchase the most convenient and least expensive tickets.

After consultation among the parties, it shall be the responsibility of \_\_\_\_\_ to purchase the tickets by {date} \_\_\_\_\_.

All parties entitled to access to, or time-sharing with the child(ren) shall be notified of the purchase by {date} \_\_\_\_\_.

Proof of the purchase and a copy of the itinerary (choose only one) ☐ shall be provided to all parties by {date} \_\_\_\_\_ ☐ shall not be provided.

Unless otherwise agreed or in the case of an unavoidable emergency, any costs incurred by a missed travel connection shall be the sole responsibility of the party who failed to timely deliver the child(ren) to the missed connection.

- ☐ Transportation costs are included in the Child Support Worksheets and/or the Order for Child Support and should not be included here.
- ☐ Mother shall pay \_\_\_\_\_% Father shall pay \_\_\_\_\_% of the transportation costs.
- ☐ Mother shall pay \_\_\_\_\_% Father shall pay \_\_\_\_\_% of the transportation costs for an adult to accompany the child(ren) during travel.
- ☐ If the parties are sharing travel costs, the non-purchasing party shall reimburse the other party within \_\_\_\_\_ days of receipt of documentation establishing the travel costs.
- ☐ Other:\_\_\_\_\_.

**4. Foreign and Out-Of-State Travel (Choose all that apply)**

- ☐ The parties may travel within the United States with the child(ren) during his/her time-sharing. The party traveling with the child(ren) shall give the other party(ies) at least \_\_\_\_\_ days written notice before traveling out of state unless there is an emergency, and shall provide the other party(ies) with a detailed itinerary, including locations and telephone numbers where the child(ren) and party can be reached at least \_\_\_\_\_ days in advance of the date of travel.
- ☐ A party may travel out of the country with the child(ren) during his/her time-sharing. At least \_\_\_\_\_ days in advance of the date of travel, the party shall provide a detailed itinerary, including locations, and telephone numbers where the child(ren) and party may be reached during the trip. Each party agrees to provide whatever documentation is necessary for the other party(ies) to take the child(ren) out of the country.
- ☐ If a party wishes to travel out of the country with the child(ren), he/she shall provide the following security for the return of the child \_\_\_\_\_  
\_\_\_\_\_
- ☐ Other\_\_\_\_\_.

**5. Other Travel and Exchange Arrangements: \_\_\_\_\_**  
\_\_\_\_\_  
\_\_\_\_\_

**IX. EDUCATION**

1. **School designation.** For purposes of school boundary determination and registration, the  
☐ Mother's ☐ Father's ☐ {If Applicable} Other Person's address shall be designated.

2. *{If Applicable}* The following provisions are made regarding private or home schooling:

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3. **Other.** 

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## **X. DESIGNATION FOR OTHER LEGAL PURPOSES**

The child(ren) named in this Parenting Plan are scheduled to reside the majority of the time with the ☐ Mother ☐ Father ☐ *{If Applicable}* Other Person. This majority designation is SOLELY for purposes of all other state and federal laws which require such a designation. **This designation does not affect the rights or responsibilities of any party under this Parenting Plan.**

## **XI. COMMUNICATION**

### **1. Between Parties**

All communications regarding the child(ren) shall be between the parties. The parties shall not use the child(ren) as messengers to convey information, ask questions, or set up schedule changes.

The parties shall communicate with each other by: (Choose **all** that apply)

- ☐ in person  
☐ by telephone  
☐ by letter  
☐ by e-mail  
☐ Other: 

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### **2. Between Parties and Child(ren)**

The parties shall keep contact information current. Telephone or other electronic communication between the child(ren) and another party shall not be monitored by or interrupted by the other party. "Electronic communication" includes telephones, electronic mail or e-mail, webcams, video-conferencing equipment and software or other wired or wireless technologies or other means of communication to supplement face to face contact.

The child(ren) may have ☐ telephone ☐ e-mail ☐ other electronic communication in the form of 

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 with the other party: (Choose **only one**)

- ☐ Anytime  
☐ Every day during the hours of 

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 to 

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☐ On the following days 

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 during the hours of 

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 to 

---

  
☐ Other: 

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3. **Costs of Electronic Communication** shall be addressed as follows:

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**XII. CHILD CARE** (Choose only one)

- ☐ Each party may select appropriate child care providers  
☐ All child care providers must be agreed upon by the parties.  
☐ Each party must offer the other party the opportunity to care for the child(ren) before using a child care provider for any period exceeding \_\_\_\_\_ hours.  
☐ Other \_\_\_\_\_.

**XIII. CHANGES TO OR MODIFICATIONS OF THE PARENTING PLAN**

Temporary changes may be made informally without a written document. When the parties do not agree, this Parenting Plan remains in effect until further order of the court.

Any substantial changes to the Parenting Plan must be sought through the filing of a supplemental petition for modification.

**XIV. RELOCATION**

Any relocation of the child(ren) is subject to and must be sought in compliance with Section 61.13001, Florida Statutes.

**XV. DISPUTES OR CONFLICT RESOLUTION**

The parties shall attempt to cooperatively resolve any disputes which may arise over the terms of the Parenting Plan. The parties may wish to use mediation or other dispute resolution methods and assistance, such as Parenting Coordinators and Parenting Counselors, before filing a court action.

**XVI. OTHER PROVISIONS**

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### SIGNATURE OF PARTIES

**I certify that I have been open and honest in entering into this Parenting Plan. I am satisfied with this plan and intend to be bound by it.**

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

\_\_\_\_\_  
Signature of Mother

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 deputy clerk.]

\_\_\_\_\_  
Personally known

\_\_\_\_\_  
Produced identification

Type of identification produced \_\_\_\_\_

**I certify that I have been open and honest in entering into this Parenting Plan. I am satisfied with this plan and intend to be bound by it.**

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

\_\_\_\_\_  
Signature of Father

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  
deputy clerk.]

\_\_\_\_ Personally known  
\_\_\_\_ Produced identification  
Type of identification produced \_\_\_\_\_

**I certify that I have been open and honest in entering into this Parenting Plan. I am satisfied with this plan and intend to be bound by it.**

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

\_\_\_\_\_  
Signature of Other Person  
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  
deputy clerk.]

\_\_\_\_ Personally known  
\_\_\_\_ Produced identification  
Type of identification produced \_\_\_\_\_


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

I, {full legal name and trade name of nonlawyer} \_\_\_\_\_,  
a nonlawyer, whose address is {street} \_\_\_\_\_, {city} \_\_\_\_\_,  
{state} \_\_\_\_\_, {phone} \_\_\_\_\_, helped {name} \_\_\_\_\_, who is  
the \_\_\_\_\_, 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.”**

*Notice for Trial*

## **INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.912(a), MEMORANDUM FOR CERTIFICATE OF MILITARY SERVICE (12/10)**

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

This form should be used if you **KNOW OR DO NOT KNOW** whether the other party in your case is on active duty in a branch of the military service of the United States. "Active duty" includes reserve personnel of the Army, Navy, Air Force, Marine Corps, and Coast Guard, and members of the Florida National Guard who have been called to active duty for more than thirty (30) days. Even if you believe that the other party has never or would never join the military, you must show the court proof that he or she is not a member of the military. Therefore, you may need to use this form to provide the court with such proof. See the instructions for an **Affidavit of Military Service**, Florida Supreme Court Approved Family Law Form 12.912(b), for additional information.

### **Servicemembers Civil Relief Act (SCRA) Certificates**

To obtain certificates of service or non-service under the Servicemembers Civil Relief Act (formerly known as Soldiers' and Sailors' Civil Relief Act of 1940) you may use the public website: <https://www.dmdc.osd.mil/scra/owa/home>. This website will provide you with the current active military status of an individual enlisted in the Army, Navy, Air Force, and Marines.

You can also receive certificates from the individual services by sending your correspondence to the appropriate military office listed below. Fill out this form and **mail one copy to each** of the military offices at the addresses on the form. You may be charged a service fee by each military service branch for their response. To assist you in determining the amount of each military branch's fee, phone numbers are listed below. You will need to call each number to find out their fee for this search.

**COAST GUARD:** USCG Commander, Personnel Service Center, Attn: PSD-MR, 4200 Wilson Blvd., Suite 1100, Arlington VA 22203, Phone (202) 493-1200  
Arlington Va. 22203, Phone: (202) 493-1200, NOTE: All requests must be in writing.  
[www.uscg.mil/hq/cgpc/home/locator/html](http://www.uscg.mil/hq/cgpc/home/locator/html).

**AIR FORCE:** HQ AFPC/DPDXIDL, Attn: World Wide Locator, 550 C Street, West, Suite 50, Randolph AFB, TX 78150-4752, Phone: (210) 565-2660, NOTE: Requests will be taken by phone.  
[www.afpc.randolph.af.mil/library/airforcelocator.asp](http://www.afpc.randolph.af.mil/library/airforcelocator.asp)

**NAVY:** Bureau of Naval Personnel, PERS-312E, 5720 Integrity Drive, Millington, TN 38055-3120, Phone: (901) 874-3388 NOTE: Requests will be taken by phone.

**MARINE CORPS:** CMC HQ (MMSB17), 2008 Elliot Road, Room 201, Quantico, VA 22134, Phone (703)784-3941  
NOTE: All requests must be in writing.

**PUBLIC HEALTH SERVICE:** Attn: Director, Division of Commissioned Corps Officer Support,  
[http://dcp.psc.gov/ad\\_search.asp](http://dcp.psc.gov/ad_search.asp) NOTE: Please direct all inquiries to the website.

**ARMY:** Army World Wide Locator Service, Enlisted Records and Evaluation Center, 8899 East 56th Street, Indianapolis, IN 46249-5301, Phone: (1-866) 771-6357, [http://dcp.psc.gov/ad\\_search.asp](http://dcp.psc.gov/ad_search.asp), fax (317) 510-3685

NOTE: All requests must be in writing

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

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

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

*Florida Supreme Court Approved Family Law Form 12.912(a), Memorandum for Certificate of Military Service (12/10)*

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

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

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

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

and

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

**MEMORANDUM FOR CERTIFICATE OF MILITARY SERVICE**

- TO:** ( ) USCG Commander, Personnel Service Center, Attn: PSD-MR, 4200 Wilson Blvd, Suite 1100, Arlington, VA 22203  
( ) HQ AFPC/DPDXIDL, Attn: World Wide Locator, 550 C. Street West, Suite 50, Randolph AFB, TX 78150-4752  
( ) Bureau of Naval Personnel, PERS-312E, 5720 Integrity Drive, Millington, TN 38055-3120  
( ) CMC, HQ, (MMSB17), 2008 Elliot Road, Room 201, Quantico, VA 22134  
( ) Public Health Service: Attn: Director, Division of Commissioned Corps Officer Support.  
[http://dcp.psc.gov/ad\\_search.asp](http://dcp.psc.gov/ad_search.asp)  
( ) Army World Wide Locator Service, Enlisted Records and Evaluation Center, 8899 East 56th Street, Indianapolis, IN 46249-5301

**RE:** \_\_\_\_\_  
{Name of Respondent}

\_\_\_\_\_  
{Respondent's Social Security Number}

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

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

\_\_\_\_\_  
Signature of Petitioner

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

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

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

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

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

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

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

a nonlawyer, whose address is *{street}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_,

*{phone}* \_\_\_\_\_, helped *{name}* \_\_\_\_\_,

who is the petitioner, fill out this form.

# 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)

Florida Family Law Rules of Procedure Form 12.932, Certificate of Compliance with Mandatory Disclosure (09/12)

- 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 12.913(a)(2), NOTICE OF ACTION FOR FAMILY CASES WITH  
MINOR CHILD(REN) (01/12)**

**When should this form be used?**

This form may be used to obtain **constructive service** (also called service by publication) in an action involving a parenting plan for a minor child under chapter 61, Florida Statutes; an action to determine temporary custody by extended family under chapter 751, Florida Statutes; and termination of a legal father's parental rights when another man is alleged to be the biological father. "Parenting plan" means a document created to govern the relationship between the parents relating to decisions that must be made regarding the minor child and must contain a time-sharing schedule for the parents and child. Section 61.046(14), Florida Statutes. You may use constructive service if you do not know where the other party lives or if the other party lives outside Florida and you are unable to obtain **personal service**. Constructive notice will allow the court to grant the relief requested, but personal service is required before a court can order payment or termination of **child support**, spousal support (**alimony**), or costs. If you are asking the court to decide how real or personal property located in Florida should be divided, the **Notice of Action** must include a specific description of the property. If you use constructive service, the court can grant only limited relief because its jurisdiction is limited. This is a complicated area of the law and you should consult an attorney before using constructive service.

You should complete this form by typing or printing the appropriate information in black ink. You must insert the other party's name and last known address and then **file** this form with the **clerk of the circuit court** in the county where your petition was filed. You must also complete and file an **Affidavit of Diligent Search and Inquiry**. Use Florida Family Law Rules of Procedure Form 12.913(b) unless you are serving the legal father in a paternity case where another man is alleged to be the biological father, in which case, you must use Form 12.913(c). You should keep a copy for your records.

After the **Affidavit of Diligent Search and Inquiry**, Family Law Rules of Procedure Form 12.913(b) or 12.913(c), is filed, the clerk will sign this form. You will need to publish notice once each week for four consecutive weeks in a "qualified" newspaper in the county where the case is pending. When in doubt, ask the clerk which newspapers are "qualified." The newspaper will charge you for this service. If you cannot afford to pay the cost of publishing this notice, you may ask the clerk to post the notice at a place designated for such postings. You will need to file an **Application for Determination of Civil Indigent Status**, which you can obtain from the clerk. If the clerk determines that you cannot afford these costs, the clerk will post the notice of action. If your case involves termination of a legal father's parental rights when another man is alleged to be the biological father, you need to publish the notice only in the county where the legal father was last known to have resided. You are responsible for locating a "qualified" newspaper in the county where the other party last resided and paying the cost of publication.

## **Where can I look for more information?**

**Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms. For further information, see rule 12.070, Florida Family Law Rules of Procedure, rule 1.070, Florida Rules of Civil Procedure, sections 61.501–61.542, Florida Statutes and chapter 49, Florida Statutes.**

## **Special notes...**

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

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

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

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

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

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

**NOTICE OF ACTION FOR**

*{Specify action}* \_\_\_\_\_

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

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

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

*{If applicable, insert the legal description of real property, a specific description of personal property, and  
the name of the county in Florida where the property is located}* \_\_\_\_\_  
\_\_\_\_\_.

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

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

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

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

CLERK OF THE CIRCUIT COURT

By: \_\_\_\_\_  
Deputy Clerk

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

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

# **INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.913(b), AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY (11/12)**

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

This form is to be used with **Notice of Action for Dissolution of Marriage (No Child or Financial Support)**, Florida Supreme Court Approved Family Law Form 12.913(a)(1) and **Notice of Action For Family Cases With Minor Child(ren)**, Form 12.913(a)(2), to obtain constructive service (also called service by publication).

The other party is entitled to actual notice of the proceedings when possible. When it is necessary to use constructive notice, it must be given in a way that is likely to provide actual notice. You must disclose the last known address of the other party. A last known address cannot be unknown. This form includes a checklist of places you can look for information on the location of the other party. While you do not have to look in all of these places, the court must believe that you have made a very serious effort to get information about the other party's location and that you have followed up on any information you received.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a notary public or deputy clerk. You should file the original and a **Notice of Action for Dissolution of Marriage (No Child or Financial Support)**, Florida Supreme Court Approved Family Law Form 12.913(a)(1), or **Notice of Action For Family Cases With Minor Child(ren)**, Form 12.913(a)(2), with the clerk of the circuit court in the county where your petition is filed. You should keep a copy for your records.

## **Where can I look for more information?**

Before proceeding, you should read **"General Information for Self-Represented Litigants"** found at the beginning of these forms. For further information, see rule 12.070, Florida Family Law Rules of Procedure and chapter 49, Florida Statutes.

## **Special notes...**

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

**AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY**

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

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

[Check all that apply]

- \_\_\_\_ United States Post Office inquiry through Freedom of Information Act for current address or any  
relocations.
- \_\_\_\_ Last known employment of Respondent, including name and address of employer. You should  
also ask for any addresses to which W-2 Forms were mailed, and, if a pension or profit-sharing  
plan exists, then for any addresses to which any pension or plan payment is and/or has been  
mailed.
- \_\_\_\_ Unions from which Respondent may have worked or that governed his or her particular trade or  
craft.
- \_\_\_\_ Regulatory agencies, including professional or occupational licensing.
- \_\_\_\_ Names and addresses of relatives and contacts with those relatives, and inquiry as to  
Respondent's last known address. You are to follow up any leads of any addresses where  
Respondent may have moved. Relatives include, but are not limited to: parents, brothers,  
sisters, aunts, uncles, cousins, nieces, nephews, grandparents, great-grandparents, former in-  
laws, stepparents, stepchildren.
- \_\_\_\_ Information about the Respondent's possible death and, if dead, the date and location of the  
death.
- \_\_\_\_ Telephone listings in the last known locations of Respondent's residence.
- \_\_\_\_ Internet at <http://www.switchboard.com> or other Internet databank locator service. Please  
indicate if a public library assisted you in your search.
- \_\_\_\_ Law enforcement arrest and/or criminal records in the last known residential area of  
Respondent.
- \_\_\_\_ Highway Patrol records in the state of Respondent's last known address.
- \_\_\_\_ Department of Motor Vehicle records in the state of Respondent's last known address.
- \_\_\_\_ Department of Corrections records in the state of Respondent's last known address.
- \_\_\_\_ Title IV-D (child support enforcement) agency records in the state of Respondent's last known  
address.
- \_\_\_\_ Hospitals in the last known area of Respondent's residence.

- \_\_\_\_ Utility companies, which include water, sewer, cable TV, and electric, in the last known area of Respondent's residence.
- \_\_\_\_ Letters to the Armed Forces of the U.S. and their response as to whether or not there is any information about Respondent. (See Memorandum for Certificate of Military Service, Florida Supreme Court Approved Family Law Form 12.912(a).)
- \_\_\_\_ Tax Assessor's and Tax Collector's Office in the area where Respondent last resided.
- \_\_\_\_ Other: {explain} \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

2. The age of Respondent is [Choose only one] ( ) known {enter age} \_\_\_\_\_ or ( ) unknown.

3. Respondent's current residence

[Choose only one]

- a. \_\_\_\_\_ Respondent's current residence is unknown to me.
- b. \_\_\_\_\_ Respondent's current residence is in some state or country other than Florida.
- c. \_\_\_\_\_ The Respondent, having residence in Florida, has been absent from Florida for more than 60 days prior to the date of this affidavit, or conceals him/her self so that process cannot be served personally upon him or her, and I believe there is no person in the state upon whom service of process would bind this absent or concealed Respondent.

4. Respondent's last known address as of {date} \_\_\_\_\_, was:

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_.

Respondent's last known employment, as of {date} \_\_\_\_\_, was

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_.

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

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

\_\_\_\_\_  
Signature of Petitioner  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
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: *{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 FORMS  
12.922(a), MOTION FOR DEFAULT, and  
12.922(b), DEFAULT

**When should these forms be used?**

If the other **party** has failed to **file** or **serve** any documents within 20 days after the date of service of your **petition**, you may ask the **clerk of the circuit court** to enter a **default** against him or her by filling out this form and filing it with the court. Generally, a default allows you to obtain an earlier **final hearing** to finish your case. Once the default is signed by the clerk, you can request a **trial** or final hearing in your case.

To obtain a default, you will need to complete **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a). You will then need to file your motion for default along with the **Default**, Florida Supreme Court Approved Family Law Form 12.922(b), so that the clerk can enter a default for you if your motion is proper.

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 you filed your petition and keep a copy for your records.

**What should I do next?**

After the default has been entered, you must ask for a hearing, so that the **judge** can consider your petition. To do this, you must contact the clerk's office, **family law intake staff**, or **judicial assistant** to schedule a hearing and file a **Notice of Hearing (General)**, Florida Supreme Court Approved Family Law Form 12.923, with the clerk. A copy of the notice of hearing must be mailed or hand-delivered to each party in the case. **You must send a notice of final hearing to the defaulted party.**

**Where can I look for more information?**

**Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms.** For further information, see rule 1.500, Florida Rules of Civil Procedure, concerning defaults and rule 1.140, Florida Rules of Civil Procedure, concerning the time within which a party can file an answer or other responsive pleading to a petition. See also rule 12.080, Florida Family Law Rules of Procedure.

**Special notes...**

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

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

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

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

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

and

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

**MOTION FOR DEFAULT**

TO THE CLERK OF THE CIRCUIT COURT:

**PLEASE ENTER A DEFAULT AGAINST RESPONDENT WHO HAS FAILED TO  
RESPOND TO THE PETITION.**

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 Petitioner

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

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

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

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

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

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

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

**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  
12.950(a), AGREEMENT FOR RELOCATION WITH MINOR CHILD(REN) (09/10)**

**When should this form be used?**

This form should be used when the parents and every other person entitled to access to, visitation, or time-sharing with the minor child(ren) are in agreement and are asking the court to permit the relocation of the child(ren)'s principal residence. "Other Person" means an individual who is not the parent, but with whom the child resides pursuant to court order, or who has the right of access to, time-sharing with, or visitation with the child(ren). This form can be used at any time after either a petition or supplemental petition to relocate has been filed and the parties reach an agreement; OR can be used when the parties are in agreement and there is an existing cause of action, judgment, or decree of record pertaining to the child(ren)'s residence or time-sharing schedule. Either an agreement for relocation or a petition to relocate is required when:

1. You plan to relocate the child(ren)'s residence more than 50 miles from the child(ren)'s principal residence at the time of the last order which established or modified either a Parenting Plan or time-sharing schedule or at the time of filing of the pending action.
2. The court has not already entered an order granting permission to relocate.
3. The relocation will be for a period of 60 consecutive days or more, not including any absence for purposes of vacation, education, or health care for the child(ren).
4. Your order or final judgment defining custody, primary residence, the Parenting Plan, or time-sharing was entered before October 1, 2009 and the order does not expressly govern the relocation of the child(ren); or was entered on or after October 1, 2009, or your case was pending on October 1, 2009.
5. If the visitation or time-sharing schedule will change due to the relocation, a Parenting Plan with a time-sharing schedule must be included with the Agreement. Regardless of whether there is an agreement, the court reserves jurisdiction to modify issues relating to the minor child(ren).

This form should be typed or printed in black ink. You must fill in all sections of the form. If you are an "other person" entitled to access, visitation, or time-sharing with the child(ren), substitute your name for Mother or Father in the form and "parties" for "parents." After completing the form, you should sign the form before a notary public or deputy clerk.

**What should I do next?**

For your case to proceed, you must properly notify the court by filing the original of the Agreement and a **Motion for Order Permitting Relocation by Agreement**, Florida Supreme Court Approved Family Law Form, 12.950 (b), with the clerk of the circuit court of one of the following: the circuit court which has jurisdiction in accordance with the Uniform Child Custody Jurisdiction and Enforcement Act; the circuit court in the county in which either parent and the child(ren) reside; or the circuit court in which the original action was adjudicated. If the order was entered in another state, or if the child(ren) live(s) in another state, you should speak with an attorney about where to file this form. You should file the original with the clerk of the circuit court and keep a copy for your records.

*Instructions for Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren)  
(09/10)*



If the issue of the child(ren)'s physical residence is already before the court in an ongoing proceeding or through a judgment issued by the court, the court may enter an order adopting the Agreement without holding a hearing once both parties have signed it and neither has requested a hearing. When a hearing is not timely requested, the court shall presume that relocation is in the best interest of the child(ren) and may adopt the Agreement without holding a hearing.

If one or more of the parties to the Agreement timely requests a hearing in writing within 10 days after the date the Agreement is filed with the court, then you must notify the other party(ies) 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. The court will then enter an order after the 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. For further information, see chapter 61, Florida Statutes.

If your case involves a modification of any provision relating to child support, you should also check with the clerk of the circuit court in the county in which you are filing this Agreement for Relocation to determine if any other forms must be filed.

If the parties agree to a modification of child support, the following forms should be filed with this Agreement:

- A Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e),
- A completed Family Law Financial Affidavit, Florida Family Law Rules of Procedure Form 12.902(b) or (c).
- A completed Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit, Florida Supreme Court Approved Family Law Form 12.902(d).

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

The Agreement for Relocation with Minor Children must contain a **Parenting Plan** with a **time-sharing schedule**. At a minimum, the Parenting Plan must describe in adequate detail:

- How the parties will share and be responsible for the daily tasks associated with the upbringing of the child(ren),
- The time-sharing schedule that specifies the time that the minor child(ren) will spend with each parent and every other person entitled to access or time-sharing,
- A designation of who will be responsible for any and all forms of health care, school-related matters, including the address to be used for school-boundary determination and registration, and any other activities,
- The methods and technologies that the parents will use to communicate with the child(ren), and

*Instructions for Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)*

- Any transportation arrangements related to access or time-sharing.

The best interests of the child(ren) is the primary consideration in the Parenting Plan. In creating the Parenting Plan, all circumstances between the parties, including the parties' historic relationship, domestic violence, and other factors must be taken into consideration. Determination of the best interests of the child(ren) shall be made by evaluating all of the factors affecting the welfare and interest of the particular minor child(ren) and the circumstances of the family as listed in s. 61.13(3), Florida Statutes.

This standard form does not include every possible issue that may be relevant to the facts of your case. The Parenting Plan should be as detailed as possible to address the time-sharing schedule. Additional provisions should be added to address all of the relevant factors. The parties should give special consideration to the age and needs of each child.

The Parenting Plan and time-sharing schedule may be set forth in the body of the Agreement for Relocation with Minor Children or may be attached as a separate document. You may attach a **Relocation/Long-Distance Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(c), or similar form.

In developing the Parenting Plan, you may wish to consult or review other materials which are available at your local library, law library or through national and state family organizations.

**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 **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.

**AGREEMENT FOR RELOCATION WITH MINOR CHILD (REN)  
\_\_\_INCLUDING OR\_\_\_ NOT INCLUDING MODIFICATION OF CHILD  
SUPPORT**

I, {full legal name} \_\_\_\_\_, (Petitioner) and I, {full legal name} \_\_\_\_\_, (Respondent) being sworn, certify that the following information is true:

1. The parties to this action were granted a final judgment of ( ) dissolution of marriage ( ) paternity on {date} \_\_\_\_\_. A copy of the final judgment and any modification(s) is/are attached.
2. [If Applicable]. The following other person is an individual who is not a parent, but with whom the child resides pursuant to a court order, or who has the right of access to, time-sharing with, of visitation with the child(ren)\_\_\_\_\_.
3. Paragraph(s)\_\_\_\_\_of the ( ) final judgment or ( ) most recent modification thereof describes the present custody, visitation, or time-sharing schedule.
4. The dependent or minor child(ren) referred to in this Agreement are:

**Name(s)**

**Birth Date(s)**

_____	_____
_____	_____
_____	_____
_____	_____

**SECTION I. RELOCATION**

- A. Since the final judgment or last modification thereof, there has been a substantial change in circumstances, requiring a modification of the present visitation, Parenting Plan, or time-sharing schedule. Both parties agree and stipulate to the following terms regarding modification to allow the \_\_\_\_\_ to relocate with the minor child (ren) and modify the terms regarding visitation or time-sharing, with or without a hearing.

*Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)*

B. The following relocation information is true and correct:

1. The location of the intended new residence, including the state, city, and physical address, if known, is: \_\_\_\_\_  
\_\_\_\_\_
2. The mailing address of the new physical residence, if not the same as the physical address, is: \_\_\_\_\_.
3. The home telephone number of the intended new residence, if known, is: \_\_\_\_\_
4. The date of the intended move or proposed relocation is: \_\_\_\_\_

**SECTION II: PARENTAL RESPONSIBILITY AND TIME-SHARING SCHEDULE (Choose only one)**

- ☐ Parental Responsibility and Time-Sharing shall remain the same as previously set out in the ☐ Final Judgment of Dissolution, ☐ Final Judgment of Paternity or subsequent ☐ Other {*title of supplemental order or judgment*} \_\_\_\_\_ dated \_\_\_\_\_ and will continue without modification;

**OR**

- ☐ The parties shall comply with the Parenting Plan which is attached and incorporated herein as Exhibit \_\_\_\_.

**OR**

- ☐ The parties shall comply with the following Parenting Plan and time-sharing schedule:

**A. JURISDICTION**

The United States is the country of habitual residence of the child(ren).

The State of Florida is the child(ren)'s home state for the purposes of the Uniform Child Custody Jurisdiction and Enforcement Act.

This Parenting Plan is a child custody determination for the purposes of the Uniform Child Custody Jurisdiction and Enforcement Act, the International Child Abduction Remedies Act, 42 U.S.C. Sections 11601 et seq., the Parental Kidnapping Prevention Act, and the Convention on the Civil Aspects of International Child Abduction enacted at the Hague on October 25, 1980, and for all other state and federal laws.

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

## B. PARENTAL RESPONSIBILITY AND DECISION MAKING

### 1. Parental Responsibility (Choose only one)

- ☐ Shared Parental Responsibility.

It is in the best interests of the child(ren) that the parents confer and jointly make all major decisions affecting the welfare of the child(ren). Major decisions include, but are not limited to, decisions about the child(ren)'s education, healthcare, and other responsibilities unique to this family.

OR

- ☐ Shared Parental Responsibility with Decision Making Authority.

It is in the best interests of the child(ren) that the parents confer and attempt to agree on the major decisions involving the child(ren). If the parents are unable to agree, the authority for making major decisions regarding the child(ren) shall be as follows:

Education/Academic decisions

☐ Mother

☐ Father

Non-emergency health care

☐ Mother

☐ Father

☐ Mother

☐ Father

☐ Mother

☐ Father

☐ Mother

☐ Father

OR

- ☐ Sole Parental Responsibility:

It is in the best interests of the child(ren) that the ☐ Mother ☐ Father shall have sole authority to make major decisions for the child(ren.) It is detrimental to the child(ren) for the \_\_\_\_\_ parents to share decision making because:

\_\_\_\_\_.

### 2. Day-to-Day Decisions

Unless otherwise specified in this Parenting Plan, each parent shall make decisions regarding day-to-day care and control of each child, including the performance of daily tasks, while the child is with that parent. Regardless of the allocation of decision making in the Parenting Plan, either parent may make emergency decisions affecting the health or safety of the child(ren) when the child is residing with that parent. A parent who makes an emergency decision shall share the decision with the other parent as soon as reasonably possible.

### 3. Extracurricular Activities (Choose all that apply)

- ☐ Either parent may register the child(ren) and allow them to participate in the activity of the child(ren)'s choice.

- ☐ The parents must mutually agree to all extra-curricular activities.

- ☐ The costs of the extra-curricular activities shall be paid by:

Mother \_\_\_\_\_%      Father \_\_\_\_\_%

☐ The uniforms and equipment required for the extra-curricular activities shall be paid by:  
Mother \_\_\_\_\_ %      Father \_\_\_\_\_ %

☐ Other: \_\_\_\_\_ .

**C. INFORMATION SHARING. Unless Otherwise Indicated or Ordered by the Court:**

1. Unless otherwise prohibited by law, both parents shall have access to medical and school records pertaining to the child(ren) and shall be permitted to independently consult with any and all professionals involved with the child(ren). The parents shall cooperate with each other in sharing information related to the health, education, and welfare of the child(ren) and they shall sign any necessary documentation ensuring that both parents have access to said records.
2. Each parent shall be responsible for obtaining records and reports directly from the school and health care providers.
3. Both parents have equal rights to inspect and receive governmental agency and law enforcement records concerning the child(ren).
4. Both parents shall have equal and independent authority to confer with the child(ren)'s school, day care, health care providers, and other programs with regard to the child(ren)'s educational, emotional, and social progress.
5. Both parents shall be listed as "emergency contacts" for the child(ren).
6. Each parent has a continuing responsibility to provide a residential and mailing address, and contact telephone number(s) to the other parent. Each parent shall notify the other parent in writing within 24 hours of any changes. Each parent shall notify the court in writing within seven (7) days of any changes.
7. Other: \_\_\_\_\_  
\_\_\_\_\_ .

**D. SCHEDULING**

**1. School Calendar**

If necessary, on or before \_\_\_\_\_ of each year, both parents should obtain a copy of the school calendar for the next school year. The parents shall discuss the calendars and the time-sharing schedule so that any differences or questions can be resolved.

The parents shall follow the school calendar of: (Choose all that apply)

- ☐ the oldest child  
☐ the youngest child  
☐ the school calendar for \_\_\_\_\_ County  
☐ the school calendar for \_\_\_\_\_ School

*Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)*

**2. Academic Break Definition**

When defining academic break periods, the period shall begin at the end of the last scheduled day of classes before the holiday or break and shall end on the first day of regularly scheduled classes after the holiday or break.

**3. Schedule Changes (Choose all that apply)**

- ☐ A parent making a request for a schedule change will make the request as soon as possible, but in any event, except in cases of emergency, no less than \_\_\_\_\_ before the change is to occur.
- ☐ A parent requesting a change of schedule shall be responsible for any additional child care, or transportation costs caused by the change.
- ☐ Other \_\_\_\_\_.

**E. TIME-SHARING SCHEDULE**

**1. Weekday and Weekend Schedule**

The following schedule shall apply beginning on \_\_\_\_\_ with the  
☐ Mother ☐ Father and continue as follows:

The child(ren) shall spend time with the **Mother** on the following dates and times:

**WEEKENDS:** ☐ Every ☐ Every Other ☐ Other (specify): \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**WEEKDAYS:** Specify days \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**OTHER:** (Specify) \_\_\_\_\_

\_\_\_\_\_

The child(ren) shall spend time with the **Father** on the following dates and times:

**WEEKENDS:** ☐ Every ☐ Every Other ☐ Other (specify): \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**WEEKDAYS:** (Specify days) \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**OTHER:** (specify) \_\_\_\_\_

\_\_\_\_\_

The child(ren) shall spend time with \_\_\_\_\_ on the following dates and times:

**WEEKENDS:** ☐ Every ☐ Every Other ☐ Other (specify): \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**WEEKDAYS:** (Specify days) \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

**OTHER:** (specify) \_\_\_\_\_

\_\_\_\_\_

Please indicate below if there is a different time-sharing schedule for any child. Complete a separate Attachment for each child for whom there is a different time-sharing schedule.

☐ There is a different time-sharing schedule for the following child(ren) in Attachment \_\_\_\_.

\_\_\_\_\_, and \_\_\_\_\_.  
(Name of Child) (Name of Child)

## 2. Holiday Schedule (Choose only one)

- ☐ No holiday time sharing shall apply. The regular time-sharing schedule set forth above shall apply.
- ☐ Holiday time-sharing shall be as the parties agree.
- ☐ Holiday time-sharing shall be in accordance with the following schedule. The holiday schedule will take priority over the regular weekday, weekend, and summer schedules. Fill in the blanks with Mother or Father to indicate where the child(ren) will be for the holidays. Provide the beginning and ending times. If a holiday is not specified as even, odd, or every year with one parent, then the child(ren) will remain with the parent in accordance with the regular schedule

<u>Even Years</u>	<u>Odd Years</u>	<u>Every Year</u>	<u>Begin/End Time</u>	
Mother's Day	_____	_____	_____	_____
Father's Day	_____	_____	_____	_____
President's Day	_____	_____	_____	_____
Martin Luther King Day	_____	_____	_____	_____
Easter	_____	_____	_____	_____
Passover	_____	_____	_____	_____
Memorial Day Weekend	_____	_____	_____	_____
4 <sup>th</sup> of July	_____	_____	_____	_____
Labor Day Weekend	_____	_____	_____	_____
Columbus Day Weekend	_____	_____	_____	_____
Halloween	_____	_____	_____	_____
Thanksgiving	_____	_____	_____	_____
Veteran's Day	_____	_____	_____	_____
Hanukkah	_____	_____	_____	_____
Yom Kippur	_____	_____	_____	_____
Rosh Hashanah	_____	_____	_____	_____
Child(ren)'s Birthdays	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## 3. Winter Break

### A. Winter Break (Choose only one)

- ☐ The ☐ Mother ☐ Father shall have the child(ren) from the day and time school is dismissed until December \_\_\_\_ at \_\_\_\_ a.m./p. m in ☐ odd-numbered years ☐ even-numbered years ☐ every year. The other parent will have the children for the second portion of the Winter Break. The parties shall alternate the arrangement each year.

Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)



- ☐ The ☐ Mother ☐ Father shall have the child(ren) for the entire Winter Break during ☐ odd-numbered years ☐ even-numbered years ☐ every year.
- ☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**B. Specific Winter Holidays**

If not addressed above, the specific Winter Holidays such as Christmas, New Year's Eve, Hanukkah, Kwanzaa, etc. shall be shared as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**4. Spring Break (Choose only one)**

- ☐ The parents shall follow the regular schedule.
- ☐ The parents shall alternate the entire Spring Break with the Mother having the child(ren) during the ☐ odd-numbered ☐ even-numbered years.
- ☐ The ☐ Father ☐ Mother shall have the child(ren) for the entire Spring Break every year.
- ☐ The Spring Break will be evenly divided. The first half of the Spring Break will go to the parent whose regularly scheduled weekend falls on the first half and the second half going to the parent whose weekend falls during the second half.
- ☐ Other: \_\_\_\_\_

**5. Summer Break (Choose only one)**

- ☐ The parents shall follow the regular schedule through the summer.
- ☐ The ☐ Mother ☐ Father shall have the entire Summer Break from \_\_\_\_\_ after school is out until \_\_\_\_\_ before school starts.
- ☐ The parents shall equally divide the Summer Break. During ☐ odd-numbered years ☐ even-numbered years, the ☐ Mother ☐ Father shall have the child(ren) from \_\_\_\_\_ after school is out until \_\_\_\_\_. The other parent shall have the child(ren) for the second half of the summer break. The parents shall alternate the first and second halves of Summer Break each year unless otherwise agreed. During the extended periods of time-sharing, the other parent shall have the child(ren)\_\_\_\_\_.
- ☐ Other: \_\_\_\_\_.

**6. Number of Overnights:**

Based upon the time-sharing schedule, the Mother has a total of \_\_\_\_\_ overnights per year and the Father has a total of \_\_\_\_\_ overnights per year. **Note: The two numbers must equal 365.**

**F. TRANSPORTATION AND EXCHANGE OF CHILD(REN)**

Both parents shall have the child(ren) ready on time with sufficient clothing packed and ready at the agreed upon time of exchange. All necessary information and medicines will accompany the child(ren).

The parties shall exchange travel information and finalize travel plans at least \_\_\_\_\_ days in advance of the date of travel. Except in cases of emergency, any parent requesting a change of travel plans after the date of finalization shall be solely responsible for any additional costs.

**1. Automobile Transportation and Exchange (Choose only one)**

If a parent is more than \_\_\_\_\_ minutes late without contacting the other parent to make other arrangements, the parent with the child(ren) may proceed with other plans and activities.

☐ The ☐ Mother ☐ Father shall provide all transportation.

☐ The ☐ Mother ☐ Father shall pick up the child(ren) at the beginning of the visit and the other parent shall pickup the child(ren) at the end of the visit. The exchange shall take place:

☐ At the parents' homes unless otherwise agreed

☐ At the following location unless the parties agree in advance to a different place \_\_\_\_\_.

☐ The parents shall meet at the following central location:

\_\_\_\_\_.

☐ Other: \_\_\_\_\_.

**2. Airplane and Other Public Transportation and Exchange (Choose all that apply)**

Airline regulations govern the age at which a child may fly unescorted. An older child or children may fly under such regulations as each airline may establish.

Airline reservations should be made well in advance, and preferably non-stop.

All flight information shall be sent to the other party(ies) at least \_\_\_\_\_ days in advance of the flight by the party purchasing the tickets.

If the child(ren) are flying accompanied by a party, the parent picking up the child(ren) shall exchange the child(ren) with the other parent at \_\_\_\_\_ and the parent returning the child(ren) shall exchange the child(ren) at \_\_\_\_\_.

If the exchange is to be made at the airport, the party flying in to pick up or drop off the child(ren) from/to the airport must notify the other party of any flight delays.

Unless otherwise agreed in advance, if the child(ren) are flying unaccompanied, the parent taking the child(ren) to the airport must call the other parent immediately upon departure to notify the other parent that the child(ren) is/are arriving, and the parent who meets the child(ren) must immediately notify the other parent upon the child(ren)'s arrival.

[ ] Until a child reaches the age of \_\_\_\_\_, the parties agree that the child(ren) shall take a direct flight and/or fly accompanied by \_\_\_\_\_.

[ ] Once a child reaches the age of \_\_\_\_\_ the child shall be permitted to fly accompanied by an airline employee.

[ ] Once a child reached the age of \_\_\_\_\_ the child shall be permitted to fly unescorted.

[ ] Other: \_\_\_\_\_.

**3. Costs of Airline and Other Public Transportation (Choose all that apply)**

The parents shall work together to purchase the most convenient and least expensive tickets.

Unless otherwise agreed or in the case of an unavoidable emergency, any costs incurred by a missed travel connection shall be the sole responsibility of the parent who failed to timely deliver the child(ren) to the missed connection.

[ ] Transportation costs are included in the Child Support Worksheets and/or the Order for Child Support and should not be included here.

[ ] The Mother shall pay \_\_\_\_\_% and the Father shall pay \_\_\_\_\_ % of the transportation costs.

[ ] The Mother shall pay \_\_\_\_\_% and the Father shall pay \_\_\_\_\_% of the transportation costs for an adult to accompany the child(ren) during travel.

[ ] If the parents are sharing travel costs, the non-purchasing parent shall reimburse the other parent within \_\_\_\_\_ days of receipt of documentation establishing the travel costs.

[ ] Other: \_\_\_\_\_.

**4. Foreign and Out-Of-State Travel (Choose all that apply)**

[ ] Either parent may travel within the United States with the child(ren) during his/her time-sharing. The parent traveling with the child(ren) shall give the other parent at least \_\_\_\_\_ days written notice before traveling out of state unless there is an emergency, and shall provide the other parent with a detailed itinerary, including locations and telephone numbers where the child(ren) and parent can be reached at least \_\_\_\_\_ days prior to traveling.

[ ] Either parent may travel out of the country with the child(ren) during his/her time-sharing. At least \_\_\_\_\_ days prior to traveling, the parent shall provide a detailed itinerary, including locations, and telephone numbers where the child(ren) and parent may be reached during the trip. Each parent agrees to provide whatever documentation is necessary for the other parent to take the child(ren) out of the country.

- ☐ If a parent wishes to travel out of the country with the child(ren), he/she shall provide the following security for the return of the child(ren) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_.

- ☐ Other \_\_\_\_\_.

**5. Other travel and exchange arrangements:**

\_\_\_\_\_  
\_\_\_\_\_.

**G. EDUCATION**

1. **School designation.** For purposes of school boundary determination and registration, the ☐ Mother's ☐ Father's address shall be designated.

2. *{If Applicable}* The following provisions are made regarding private or home schooling:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

3. **Other.** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_.

**H. DESIGNATION FOR OTHER LEGAL PURPOSES**

The child(ren) named in this Relocation Agreement are scheduled to reside the majority of the time with the ☐ Mother ☐ Father. This majority designation is SOLELY for purposes of all other state and federal laws which require such a designation. **This designation does not affect either parent's rights or responsibilities under this Relocation Agreement.**

**I. COMMUNICATION**

**1. Between Parents**

All communications regarding the child(ren) shall be between the parents. The parents shall not use the child(ren) as messengers to convey information, ask questions, or set up schedule changes.

The parents shall communicate with each other by: (Choose all that apply)

- ☐ in person  
☐ by telephone  
☐ by letter  
☐ by e-mail  
☐ Other: \_\_\_\_\_.

**2. Between Parent and Child(ren)**

Both parents shall keep contact information current. Telephone or other electronic communication between the child(ren) and the other parent shall not be monitored by or interrupted by the other parent. "Electronic communication" includes telephones, electronic mail or e-mail, webcams, video-conferencing equipment and software or other wired or wireless technologies or other means of communication to supplement face to face contact.

*Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)*

The child(ren) may have ☐ telephone ☐ e-mail ☐ other electronic communication in the form of \_\_\_\_\_ with the other parent: (Choose only one)

- ☐ Anytime  
☐ Every day during the hours of \_\_\_\_\_ to \_\_\_\_\_.  
☐ On the following days \_\_\_\_\_  
during the hours of \_\_\_\_\_ to \_\_\_\_\_.  
☐ Other: \_\_\_\_\_.

**3. Costs of Electronic Communication shall be addressed as follows:**

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**J. CHANGES OR MODIFICATIONS OF THE PARENTING PLAN**

Temporary changes may be made informally without a written document. When the parents do not agree, the Parenting Plan remains in effect until further order of the court.

Any substantial changes to the Parenting Plan must be sought through the filing of a supplemental petition for modification.

**K. DISPUTES OR CONFLICT RESOLUTION**

Parents shall attempt to cooperatively resolve any disputes which may arise over the terms of the Parenting Plan. The parents may wish to use mediation or other dispute resolution methods and assistance, such as Parenting Coordinators and Parenting Counselors, before filing a court action.

**SECTION III: CHILD SUPPORT AND INSURANCE**

**A. If the requested modification is granted, the parties:**

- ☐ agree that child support should be modified, consistent with the modification of the time-sharing schedule  
☐ agree that child support will NOT be modified.

**B. The ☐ Mother ☐ Father will pay child support, under Florida's child support guidelines, section 61.30, Florida Statutes, to the other parent. The Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), is completed and attached.**

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

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*Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)*

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

D. **Health Insurance.** The ☐ Mother ☐ Father will maintain health insurance for the parties' minor child(ren). The party providing health insurance will provide insurance cards to the other party showing coverage.

**OR**

☐ Health insurance is not reasonable in cost and accessible to the child(ren) at this time. Any uninsured/ unreimbursed medical costs for the minor child(ren) shall be assessed as follows:

- a. ☐ Shared equally by both parents.
- b. ☐ Prorated according to the child support guideline percentages.
- c. ☐ Other {explain}: \_\_\_\_\_

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

E. **Dental Insurance.** The ☐ Mother ☐ Father will maintain dental insurance for the parties' minor child(ren). The party providing dental insurance will provide insurance cards to the other party showing coverage.

**OR**

☐ Dental insurance is not reasonably available at this time. Any uninsured/unreimbursed dental costs for the minor child(ren) shall be assessed as follows:

- a. ☐ Shared equally by both parents.
- b. ☐ Prorated according to the child support guideline percentages.
- c. ☐ Other {explain}: \_\_\_\_\_

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

F. **Life Insurance.** The ☐ Mother ☐ Father shall be required to maintain life insurance coverage for the benefit of the parties' minor child(ren) in the amount of \$ \_\_\_\_\_ until the youngest child turns 18, becomes emancipated, marries, joins the armed services, or dies.

#### SECTION IV: OTHER

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

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

\_\_\_\_\_  
Signature of Mother

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 deputy clerk.]

\_\_\_\_ Personally known

\_\_\_\_ Produced identification

Type of identification produced \_\_\_\_\_

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

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

\_\_\_\_\_  
Signature of Father

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 deputy clerk.]

\_\_\_\_ Personally known

\_\_\_\_ Produced identification

Type of identification produced \_\_\_\_\_

*Florida Supreme Court Approved Family Law Form 12.950(a), Agreement for Relocation with Minor Child(ren) (09/10)*

*Self Service Packet # 63 Page - 115 -*

**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, whose address is {street} \_\_\_\_\_,

{city} \_\_\_\_\_, {state} \_\_\_\_\_, {phone} \_\_\_\_\_,

helped {name} \_\_\_\_\_, who is the [ ☐ ] Mother [ ☐ ] Father [ ☐ ], fill out this form.



## **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: \_\_\_\_\_

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

FAMILY DIVISION: \_\_\_\_\_

CASE NO. \_\_\_\_\_

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

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

\_\_\_\_\_/

JOINT PRETRIAL STATEMENT

I. INFORMATION ABOUT THE PARTIES

Petitioner's Name: \_\_\_\_\_

Petitioner's Address: \_\_\_\_\_

Petitioner's Age: \_\_\_\_\_

Does Petitioner wish to have former name restored? Yes/No

If yes, what is name to be restored to? \_\_\_\_\_

Petitioner's Employer: \_\_\_\_\_

Address of Petitioner's Employer: \_\_\_\_\_

Petitioner's Net Monthly Income: \_\_\_\_\_

Is Petitioner's Net Monthly Income Disputed by Respondent? Yes/No

Respondent's Name: \_\_\_\_\_

Respondent's Address: \_\_\_\_\_

Respondent's Age: \_\_\_\_\_

Respondent's Employer: \_\_\_\_\_

Address of Respondent's Employer: \_\_\_\_\_

Respondent's Net Monthly Income: \_\_\_\_\_

Is Respondent's Net Monthly Income Disputed by Petitioner? Yes/No

Name of each child, their date of birth, and current place of residence:

Name	D.O.B.	Current Place of Residence

Date and Place of Marriage: \_\_\_\_\_

Date of Final Separation: \_\_\_\_\_

Is There a Written Settlement Agreement? Yes/No

Is Child Support an issue? Yes/No      If yes, attach a fully completed child support calculation worksheet (Florida Family Rule Form 12.902(e)).

## II. TRIAL INFORMATION

Date Petition Filed: \_\_\_\_\_

Docket Number: \_\_\_\_\_

Date Answer Filed: \_\_\_\_\_

Docket Number: \_\_\_\_\_

Date Counter-Petition Filed: \_\_\_\_\_

Docket Number: \_\_\_\_\_

Date Answer to Counter-Petition Filed: \_\_\_\_\_

Docket Number: \_\_\_\_\_

Pending Motions: \_\_\_\_\_

Docket Number: \_\_\_\_\_

Date Parties Attended Mediation: \_\_\_\_\_

Attach Petitioner's Witness List

Attach Petitioner's Exhibit List (all exhibits must be pre-marked for trial)

Attach Respondent's Witness List

Attach Respondent's Exhibit List (all exhibits must be pre-marked for trial)

Are There Any Support Arrearages? Y/N

If yes, state the amount of the arrearage, the date and amount of the next payment due, and the date and docket entry number for the court order establishing the support that is in arrears.

List Relief Sought by Petitioner:

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List Relief Sought by Respondent:

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Stipulated Facts:

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Issues for the Court to Decide:

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### MARITAL ASSETS

(Complete this section if this is a dissolution of marriage action. If value is disputed, list the asset again on the next line and fill out columns 2, 3, 4, & 5 for each party. Footnote any item for which a special equity is claimed. List legal description on a separate page, if necessary)

	(1)	(2)	(3)	(4)	(5)	Wife's Proposal		Husband's Proposal	
	Description	Value	Liens	Net Equity	Opinion Source	Wife	Husband	Wife	Husband
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

### MARITAL LIABILITIES

(Complete this section if this is a dissolution of marriage action)

	Description	Monthly Payment	Balance Due	Name of Person on this Liability	Opinion Source	Wife's Proposal		Husband's Proposal	
						Wife	Husband	Wife	Husband
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

### Non-Marital Assets Claimed

(Complete this section if this is a dissolution of marriage action)

Description	Owner	Reason for Claim	Disputed?

**Non- Marital Liabilities Claimed**  
(Complete this section if this is a dissolution of marriage action)

Description	Obligor	Reason for Claim	Disputed?

\_\_\_\_\_  
Attorney for Petitioner /Pro Se Petitioner  
Florida Bar Number: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Respondent /Pro Se Respondent  
Florida Bar Number: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Date: \_\_\_\_\_



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

**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](http://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.

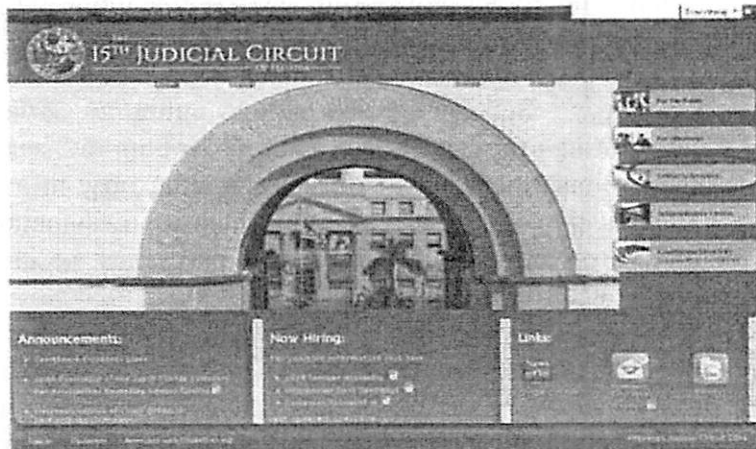
Filing of Documents: The Rules of Judicial Administration require that all documents be filed with the court either before service on the opposing party or immediately thereafter. Documents are deemed filed when they are filed with the clerk of court. If the sender learns that the e-mail did not reach 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.



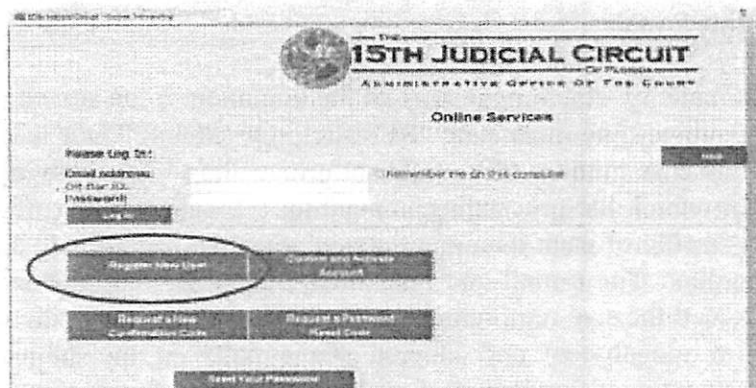


THE  
**15TH JUDICIAL CIRCUIT**  
OF FLORIDA  
ADMINISTRATIVE OFFICE OF THE COURT

**Instructions for E-Service Registration For Self Represented Litigants**

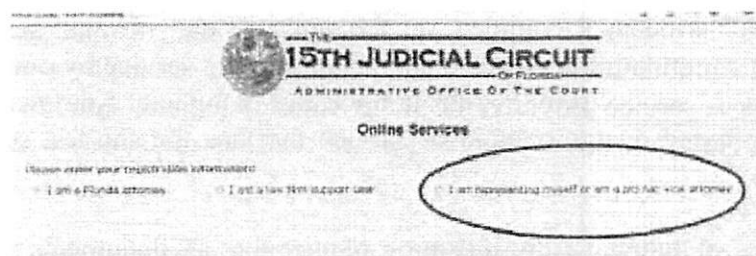


- Go to [www.15thcircuit.com](http://www.15thcircuit.com)
- Select [Online Scheduling](#)
- Select [Online Scheduling Application](#)



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

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

**E-Service Online Scheduling Services**

Please select your registration information:

☐ I am a Florida attorney ☐ I am a law firm support user ☐ I am representing myself or am a pro hac vice attorney

Please ensure that your registered party name matches your court documents exactly.

**\*Indicates required field.**

Register Email:  (Florida courts specify in the gender/age/initials and marital status in gender or female address)

Password:

Confirm Password:

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.

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

**E-Service Online Scheduling Services**

Please enter the security code that appears:

First Name:  Middle Name:  Last Name:

Address:  City:  State:  Zip:

Phone:

Please enter the security code that appears:

Click the speaker icon to read the letters aloud.

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](http://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.

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} \_\_\_\_\_

## INSTRUCTIONS FOR NOTICE OF CHANGE OF ADDRESS

### When should this form be used?

This form should be used when 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: \_\_\_\_\_

E-Mail: \_\_\_\_\_

\_\_\_\_\_  
Signature