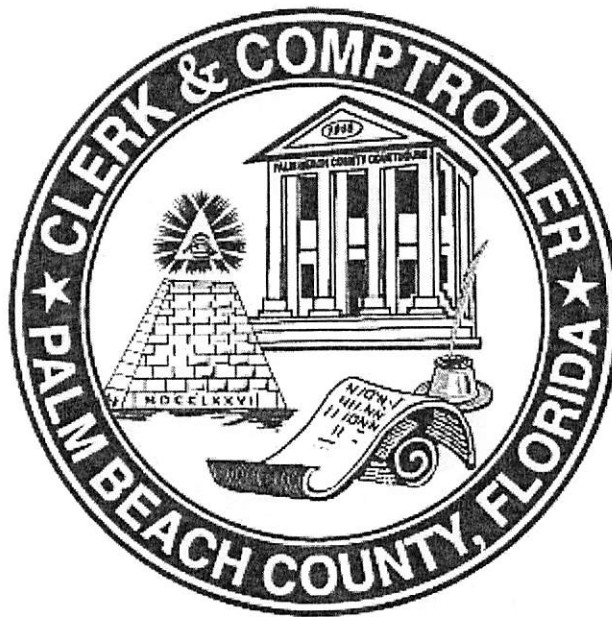


**Sharon R. Bock**  
**CLERK & COMPTROLLER**  
**SELF SERVICE CENTER**

**Your Guide Through The Courts**



**Packet #53**

*Revised 09/2014*

**NOTICE TO PAYOR**

**NON-REFUNDABLE**

**(16 PAGES)**

**\$ 4.00**

## **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  
38844 State Rd #80  
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

# NOTICE TO PAYOR

Packet # 53

## When should this form be used?

This form should be used for when an **Income Deduction Order** has been entered by the Court which is to take effect immediately.

## THERE IS NO FILING FEE FOR THIS PROCESS

### The Petitioner must complete and file the following forms:

	Page
✓ Notice to Payor 12.996(b), (09/12)	5
✓ Notice of Filing Return Receipt 12.996(c), (09/12)	9

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

✓ Designation of Current Mailing and E-Mail Address and Directions to Provide E-Mail Address to Court Administration, A.O. 2.310 (04/13)	13
✓ Notice of Change of Address, (09/14) ( <i>Must be filed whenever you change your address</i> )	16

**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

☐ **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.

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

# **INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.996(b), NOTICE TO PAYOR (09/12)**

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

This form should be used when an **Income Deduction Order** has been entered by the Court which is to take effect immediately.

This form should be typed or printed in black ink. After completing this form, the original of this form should be filed with the clerk of the circuit court in the county in which the action is pending. You should keep a copy for your own records.

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

A copy of this form, and a copy of the Income Deduction Order, must be sent to the obligor's payor by certified mail, return receipt requested. The return receipt should be sent to the person that prepared this form so that it can be filed with the clerk along with Florida Family Law Rules of Procedure Form 12.996(c), **Notice of Filing Return Receipt**.

A copy of this form must also be served on the other party or his or her attorney. 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 61.1301, Florida Statutes.

## **Special Instructions...**

The Obligor's social security number must be written on the copies of the Notice to Payor that are mailed to the Obligor's Payor and served on the other party or his or her attorney. The social security number should **not** be written on the copy of the Notice to Payor filed with the court.

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 TO PAYOR**

TO:

Name of Obligor's Payor: \_\_\_\_\_

Payor's Address: \_\_\_\_\_  
\_\_\_\_\_

RE: Obligor

Obligee

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

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Obligor's social security number: \_\_\_\_\_.

**NOTE:** The Obligor's social security number should be placed on the copy of the Notice to Payor that is mailed to the Obligor's Payor. This line should be left blank on the original Notice to Payor filed with the court.

**YOU, THE PAYOR, ARE HEREBY NOTIFIED** that, under section 61.1301, Florida Statutes, you have the responsibilities and rights set forth below with regard to the accompanying Income Deduction Order and/or any attachment(s):

1. You are required to deduct from the obligor's income the amount specified in the income deduction order, and in the case of a delinquency the amount specified in the notice of delinquency, and to pay that amount to the State of Florida Disbursement Unit. The amount actually deducted plus all administrative charges shall not be excess of the amount allowed under s. 303(b) of the Consumer Credit Protection Act, 15 U.S.C. §1673(b) as amended.
2. You must implement income deduction no later than the first payment date which occurs more than 14 days after the date the income deduction order was served on you, and you shall conform the amount specified in the income deduction order or, in Title IV-D cases, income deduction notice to the obligor's pay cycle. The court should request at the time of the order that the payment cycle will reflect that of the obligor.

3. You must forward, within 2 days after each date the obligor is entitled to payment from you, to the State of Florida Disbursement Unit, the amount deducted from the obligor's income, a statement as to whether the amount totally or partially satisfies the periodic amount specified in the income deduction order, or in Title IV-D cases, income deduction notice, and the specific date each deduction is made. If the IV-D agency is enforcing the order, you shall make these notifications to the agency.
4. If you fail to deduct the proper amount from the obligor's income, you are liable for the amount you should have deducted, plus costs, interest, and reasonable attorneys' fees;
5. You may collect up to \$5 against the obligor's income to reimburse you for administrative costs for the first income deduction and up to \$2 for each deduction thereafter.
6. The notice to payor, or, in Title IV-D cases, income deduction notice, and in the case of a delinquency, the notice of delinquency, are binding on you until further notice by the obligee, IV-D agency, or the court or until you no longer provide income to the obligor.
7. When you no longer provide income to the obligor, you shall notify the obligee and provide the obligor's last known address and the name and address of the obligor's new payor, if known. If you violate this provision, you are subject to a civil penalty not to exceed \$250 for the first violation or \$500 for any subsequent violation. If the IV-D agency is enforcing the order, you shall make these notifications to the agency instead of the obligee. Penalties shall be paid to the obligee or the IV-D agency, whichever is enforcing the income deduction order.
8. You shall not discharge, refuse to employ, or take disciplinary action against an obligor because of the requirement for income deduction. A violation of this provision subjects you to a civil penalty not to exceed \$250 for the first violation or \$500 for any subsequent violation. Penalties shall be paid to the obligee or the IV-D agency, whichever is enforcing the income deduction, if any alimony or child support obligation is owing. If no alimony or child support obligation is owing, the penalty shall be paid to the obligor.
9. The obligor may bring a civil action in the courts of this state against a payor who refuses to employ, discharges, or otherwise disciplines an obligor because of income deduction. The obligor is entitled to reinstatement of all wages and benefits lost, plus reasonable attorneys' fees and costs incurred.
10. The requirement for income deduction has priority over all other legal processes under state law pertaining to the same income and that payment, as required by the notice to payor or the income deduction notice, is a complete defense by the payor against any claims of the obligor or his or her creditors as to the sum paid.
11. When you receive notices to payor or income deduction notices requiring that the income of two or more obligors be deducted and sent to the same depository, the payor may combine the amounts that are to be paid to the depository in a single payment as long as the payments attributable to each obligor are clearly identified.
12. If you receive more than one notice to payor or income deduction notice against the same obligor, the payor shall contact the court or, in Title IV-D cases, the Title IV-D agency for further instructions.

13. In a Title IV-D case, if an obligation to pay current support is reduced or terminated due to the emancipation of a child and the obligor owes an arrearage, retroactive support, delinquency, or costs, income deduction continues at the rate in effect immediately prior to emancipation until all arrearages, retroactive support, delinquencies, and costs are paid in full or until the amount of withholding is modified.
14. All notices to the obligee shall be sent to the address provided in this notice to payor, or any place thereafter the obligee requests in writing.
15. An employer who employed 10 or more employees in any quarter during the preceding state fiscal year or who was subject to and paid tax to the Department of Revenue in an amount of \$20,000 or more shall remit support payments deducted pursuant to an income deduction order or income deduction notice and provide associated case data to the State Disbursement Unit by electronic means approved by the department. Payors who are required to remit support payments electronically can find more information on how to do so by accessing the State Disbursement Unit's website at [www.floridasdu.com](http://www.floridasdu.com) and clicking on "Payments." Payment options include Expert Pay, Automated Clearing House (ACH) credit through your financial institution, [www.myfloridacounty.com](http://www.myfloridacounty.com), or Western Union. Payors may contact the SDU Customer Service Employer telephone line at 1-888-833-0743.
16. Additional information regarding the implementation of this Notice to Payor may be found at [www.florida.sdu.com](http://www.florida.sdu.com).

I certify that a copy of this document was [check all used]: ( ) emailed ( ) 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: \_\_\_\_\_  
Email Address(es): \_\_\_\_\_

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

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

# **INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.996(c) NOTICE OF FILING RETURN RECEIPT (09/12)**

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

This form should be used when an **Income Deduction Order**, Florida Family Law Rules of Procedure Form 12.996(a), is entered by the court and a **Notice to Payor**, Florida Family Law Rules of Procedure Form 12.996(b), has been sent by certified mail to the **obligor's payor**. When the post office returns the return receipt to you showing that the obligor's payor has received the **Notice to Payor**, you should type or print this form in black ink. After completing this form, you should sign it and attach the return receipt you received from the post office. The original of this form (and the attached return receipt) should be **filed** with the **clerk of the circuit court** in the county in which the action is pending. You should keep a copy for your own records.

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

A copy of this form must also be served on the other party or his or her attorney. **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 61.1301, Florida Statutes.

## **Special notes...**

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



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

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

\_\_\_\_\_,  
Petitioner,  
and  
\_\_\_\_\_,  
Respondent.

**NOTICE OF FILING RETURN RECEIPT**

{Name} \_\_\_\_\_, the [check only one] ( )  
)Petitioner ( )Respondent, files the attached Return Receipt in reference to the Notice to Payor sent by  
certified mail to {Payor's name} \_\_\_\_\_, the [check only one] ( ) Petitioner's ( )  
Respondent's employer.

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

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

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Email Address(es): \_\_\_\_\_

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

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

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

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

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

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

Email 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} \_\_\_\_\_

{street} \_\_\_\_\_

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



— 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.

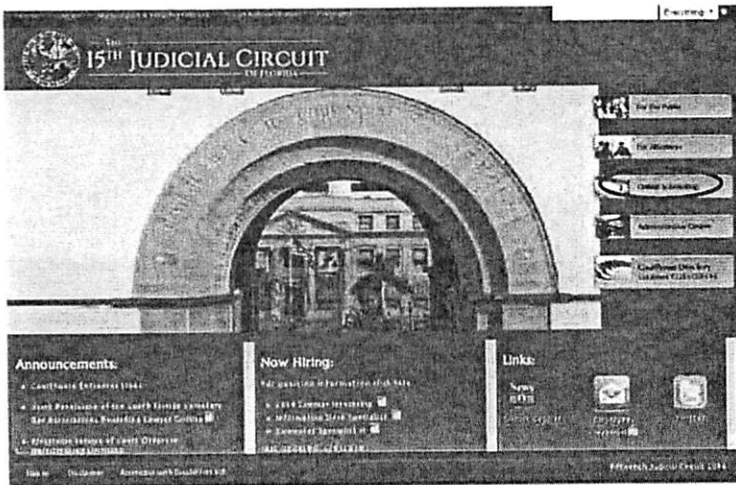
Instructions for E-Service Registration for Self Represented Litigants, (06/13)

*Self Service Center Packet # 53 Page 10*

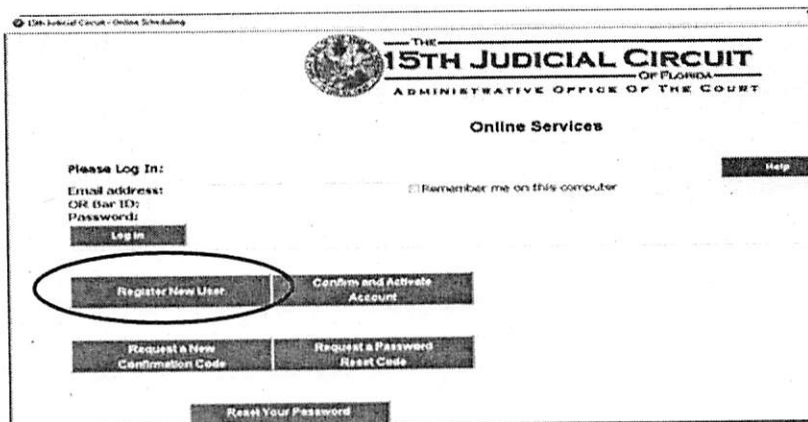


THE  
**15TH JUDICIAL CIRCUIT**  
OF FLORIDA  
ADMINISTRATIVE OFFICE OF THE COURT

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

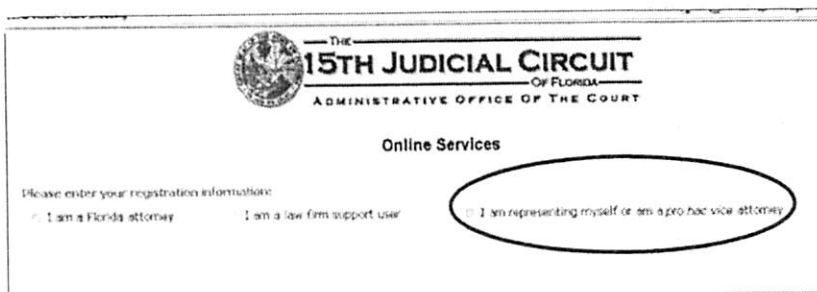


- Go to [www.15thcircuit.com](http://www.15thcircuit.com)
- Select Online Scheduling
- Select Online Scheduling Application



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**

E-Service/Online Scheduling Instructions  
Frequently Asked Questions  
E-Service/Online Scheduling Diagram  
E-Service/Online Scheduling Process  
E-Service/Online Scheduling Login

Please enter 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.

Login Email Address: \* (The login email is specific to the person registering and should not be a generic e-service 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.

First Name: \*  
Middle Name: \*  
Last Name: \*  
Suffix: \*  
System Greeting: \*

Street Address: \*  
City: \*  
State Abbreviation: \*  
ZIP: \*

Business Phone: \*  
Fax: \*  
Cell: \*

Please enter the security code that is shown.

vDy6d8

Click the speaker icon to read the letters aloud

Submit

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.

Instructions for E-Service Registration for Self Represented Litigants, (06/13)

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.

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

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

**Other party or his/her attorney**

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

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

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

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

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

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

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

STATE OF FLORIDA  
COUNTY OF PALM BEACH

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

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

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

\_\_\_\_\_ Personally Known

\_\_\_\_\_ Produced Identification

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

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

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

This form was completed with the assistance of:

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

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

{street} \_\_\_\_\_

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

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

# INSTRUCTIONS FOR NOTICE OF CHANGE OF ADDRESS

## When should this form be used?

This form should be used when 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