

THIRTEENTH JUDICIAL CIRCUIT
FAMILY LAW DIVISION

**MOTION FOR
INCOME WITHHOLDING ORDER (IWO)**
(formerly Income Deduction Order)

(Packet #43)

This packet should only be used if there is an existing Hillsborough County court order for child support and/or alimony.

If you choose to represent yourself (*pro se*) in your case, you should be aware that you will be required to follow the same rules that are required in cases filed by persons represented by attorneys. The judge or general magistrate assigned to your case is not required to grant what you request in a form. If you do not like the outcome of your case, you may not be able to change it. If you have any questions or concerns about your case, you should consult with an attorney.

If you do not know an attorney, you may call the Lawyer Referral Service at 221-7780. If you do not have the money to hire an attorney, you may apply to Bay Area Legal Services by calling 232-1343. You may also obtain legal information at the Legal Information Center at the George Edgecomb Courthouse (call 864-2280 for hours and information).

All instructions and forms distributed by the Thirteenth Judicial Circuit are provided merely 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. The Thirteenth Judicial Circuit does not guarantee that either the instructions or the forms will achieve the result desired by the parties or ensure that any individual judge will follow the procedures exactly or accept each and every form as drafted. Any person using these instructions and/or forms does so at his or her own risk, and the Thirteenth Judicial Circuit shall not be responsible for any losses incurred by any person in reliance on the instructions and/or forms.

In no event will the Florida Supreme Court, The Florida Bar, or anyone contributing to the production of these forms, commentary, instructions, and appendices be liable for any direct, indirect, or consequential damages from their use.

<u>FORMS CONTAINED IN THIS PACKET</u>	<u>FORM #</u>	<u>WHEN TO USE</u>
General Information for Self-Represented Litigants	Appendix C	For your information only
12 Rules of Courtroom Civility	12 Rules	Required to start
Nonlawyer Disclosure	12.900(a)	Required if someone who is not a lawyer helps you with the forms
Joint Motion for IWO	Joint Motion	Use if the other party agrees to the Income Withholding Order
Motion for IWO	Motion	Use if the other party does not agree to the Income Withholding Order
Income Withholding Order (IWO)	OMB 0970-0154	Required
Notice to Payor	12.996 (b)	Required
Notice of Filing Return Receipt	12.996 (c)	Required
Florida Addendum to IWO	12.996 (d)	Required
Attachment A	Attachment A	Required
Motion for Referral to the General Magistrate	12.920(a)	Required for cases involving alimony
General Magistrate / Hearing Officer Division Referral Assignment Table	Table	To determine the General Magistrate / Hearing Officer assigned to your case
Notice of Hearing	Form 12.923	Use if a hearing is scheduled
Fee Schedule for Family Law Cases	Fee	A schedule of fees for Family Law related cases
Notice of Confidential Information Within Court Filing	2.40(d)(2)	Use to notify the clerk of documents containing confidential information

STEP BY STEP INSTRUCTIONS

IF THE OTHER PARTY AGREES TO THE INCOME DEDUCTION ORDER AND IS WILLING TO SIGN THE JOINT MOTION, FOLLOW THESE STEPS:

STEP ONE - Complete the forms to start the case and have them notarized

- **FORMS MUST BE COMPLETED AND SIGNED IN BLACK INK AND MOST MUST BE NOTARIZED.** The clerk's office will notarize documents and charge a fee (see attached schedule). Please bring a valid ID.
- **Names must be written the same way on all documents (no full names on one document and initials on another).**
- **Your CASE NUMBER AND DIVISION must be written on all documents.**
- **You will need:**
 - **2 copies of the latest support order,**
 - **The name and address of the Obligor's employer,**
 - **3 stamped addressed envelopes (each envelope must be large enough to hold at least 12 pages)**

Complete the following forms and notarize the ones with a notary signature line (USE THE INFORMATION IN THE EXISTING SUPPORT ORDER AS A GUIDE FOR COMPLETING THESE FORMS):

- A. 12 Rules of Courtroom Civility - (does not need to be notarized)
- B. Joint Motion for IWO – (must be signed and notarized by both parties). **Attach a copy of the support order.**
- C. Income Withholding Order (IWO), form OMB 0970-0154
- D. Florida Addendum to IWO, form 12.996 (d)
- E. Attachment A / Payment Information Sheet
- F. Notice to Payor, form 12.996 (b)

STEP TWO – Make copies

After you have completed the forms and have signed and notarized them, make 4 copies of the Joint Motion and 3 copies of everything else you have completed. If your case involves the Department of Revenue, Office of Child Support Enforcement, make 1 extra set of copies and an extra stamped envelope (addressed to: Department of Revenue, Office of Child Support Enforcement, 6302 E. Martin Luther King Jr. Blvd., Suite 110, Tampa, Florida 33619). Copies can be obtained for a fee in the Court Business Center, on the 6th floor of the George Edgecomb Courthouse.

STEP THREE - Filing your motion

Take the *original* completed and signed Joint Motion, with a copy of the support order attached, to the clerk on the 1st floor of the George Edgecomb Courthouse and pay the filing fee, if applicable.

STEP FOUR – Mail paperwork to the Judge

1. Mail the following to the Division/Judge assigned to your case (the Division of your case can be found next to your case number):
 - a. 1 copy of the completed and signed Motion for IWO,
 - b. 1 copy of the latest support order,
 - c. The *original* completed Income Withholding Order (IWO), form OMB 0970-0154,
 - d. 3 copies of the completed Income Withholding Order (IWO), form OMB 0970-0154,
 - e. The *original* completed Florida Addendum to IWO, form 12.996 (d),
 - f. 3 copies of the completed Florida Addendum to IWO, form 12.996 (d),
 - g. The *original* completed Attachment A / Payment Information Sheet,
 - h. 3 copies of the completed Attachment A / Payment Information Sheet,
 - i. The *original* completed Notice to Payor, form 12.996 (b),
 - j. 3 copies of the completed Notice to Payor, form 12.996 (b),
 - k. 3 stamped envelopes, one addressed to each party and one addressed to the Obligor's employer (envelopes and stamps can be purchased in the Court Business Center on the 6th floor of the Edgecomb courthouse)
2. If your case is assigned to a judge in Tampa, mail your documents and envelopes to:
Judge of Division _____, George Edgecomb Courthouse, 800 E. Twiggs Street, 4th Floor, Tampa, Florida 33602.
3. If your case is assigned to a judge in Plant City (Division R, S or T), mail your documents and envelopes to:
Judge of Division _____, Plant City Courthouse, 301 N. Michigan Avenue, Plant City, Florida 33563.

YOU WILL RECEIVE A COPY OF THE SIGNED ORDER IN THE MAIL.

STEP BY STEP INSTRUCTIONS

IF THE OTHER PARTY DOES NOT AGREE TO THE INCOME WITHHOLDING ORDER OR IS NOT WILLING TO SIGN THE JOINT MOTION, FOLLOW THESE STEPS:

STEP ONE - Complete the forms to start the case and have them notarized

- **FORMS MUST BE COMPLETED AND SIGNED IN BLACK INK AND MOST MUST BE NOTARIZED.** The clerk's office will notarize documents and charge a fee (see attached schedule). Please bring a valid ID.
 - **Names must be written the same way on all documents (no full names on one document and initials on another).**
 - **Your CASE NUMBER AND DIVISION must be written on all documents.**
 - **Complete the following forms and notarize the ones with a notary signature line:**
 - A. 12 Rules of Courtroom Civility - (does not need to be notarized)
 - B. Motion for Income Withholding Order – (must be signed and notarized). **Attach a copy of the support order.**
- If you are seeking an IWO for ALIMONY, complete the following additional form:**
- G. Motion for Referral to the General Magistrate, Form 12.920(a)

STEP TWO – Make copies

After you have completed the forms and have signed and notarized them, make 2 complete copies of everything you have completed (one copy is for your records and one copy is for the other party). If you are filing a Motion for Referral to the General Magistrate, make 1 extra copy of that and 1 extra copy of the Motion for IWO. If your case involves the Department of Revenue, Office of Child Support Enforcement, make 1 extra set of copies – for the Office of Child Support Enforcement. Copies can be obtained for a fee in the Court Business Center, on the 6th floor of the George Edgecomb Courthouse.

STEP THREE - Filing your motion

Take the *original* set of completed and signed forms to the clerk on the 1st floor of the George Edgecomb Courthouse and pay the filing fee, if applicable.

STEP FOUR – Notifying the other party

Mail, fax, or hand-deliver 1 set of copies of your documents to the other party. If your case involves the Department of Revenue, Office of Child Support Enforcement, mail 1 set of copies to the following address: Department of Revenue, Office of Child Support Enforcement, 6302 E. Martin Luther King Jr. Blvd., Suite 110, Tampa, Florida 33619.

STEP FIVE – Process a Motion for Referral to the General Magistrate?

4. If you are filing a “Motion for Referral to the General Magistrate” (if your Motion seeks an IWO for alimony), mail the following to the Judge assigned to your case:
 - a. 1 copy of the Motion for IWO,
 - b. 1 copy of the Motion for Referral to the General Magistrate,
 - c. 2 stamped envelopes, one addressed to each party (envelopes and stamps can be purchased in the Court Business Center on the 6th floor of the Edgecomb Courthouse)
5. If your case is assigned to a judge in Tampa, mail your documents and envelopes to:
Judge of Division _____, George Edgecomb Courthouse, 800 E. Twiggs Street, 4th Floor, Tampa, Florida 33602.
6. If your case is assigned to a judge in Plant City (Division R, S or T), mail your documents and envelopes to:
Judge of Division _____, Plant City Courthouse, 301 N. Michigan Avenue, Plant City, Florida 33563.
7. The Division of your case can be found next to your case number.
8. If the Motion for Referral to the General Magistrate is not accompanied by 2 stamped addressed envelopes, your Referral will not be processed and your case will be delayed.

STEP SIX – Scheduling the hearing

1. Call the administrative assistant for the general magistrate/hearing officer assigned to your case and request a hearing date. The general magistrate/hearing officer assigned is determined by **the last two digits of your case number (see attached table)**.
 - If assigned to GM-1, call General Magistrate/Hearing Officer **Cuellar-Stilo** (Phone: 272-5351)
 - If assigned to GM-2, call General Magistrate/Hearing Officer **Johnson** (Phone: 276-2335)
 - If assigned to GM-3, call General Magistrate/Hearing Officer **Montagno** (Phone: 276-2337)
 - If assigned to GM-4, call General Magistrate/Hearing Officer **Proctor** (Phone: 272-6435)
1. Once a hearing date has been scheduled, complete a Notice of Hearing, Form 12.923, with the place, date, and time of the hearing.
2. Sign the Notice of Hearing and complete the Certificate of Service part of the notice which states the date you are filing the notice and how you are providing a copy to the other party.
3. Make 2 copies of the Notice of Hearing.
4. File the original Notice of Hearing with the clerk, send a copy of the notice to the other party, and keep a copy for your records.

STEP SEVEN – The hearing

Bring the following documents to your hearing:

1. A copy of the support order
2. A completed Income Withholding Order (IWO), form OMB 0970-0154
3. A completed Florida Addendum to IWO, form 12.996 (d)
4. A completed Attachment A / Payment Information Sheet
5. Records of payments made, if any.
6. Two stamped envelopes – one addressed to you, one addressed to the other party.

Normally the hearing is when the request in your motion will be decided.

HOW TO DRESS - Dress appropriately. No shorts, tank tops, or sandals. Do not chew gum.

WHAT TO EXPECT

The hearing will take place in a hearing room or a courtroom. You will not be in front of a jury, just the general magistrate or judge. Do not interrupt the magistrate or judge when he or she speaks. When speaking to the magistrate or judge, address him or her as “Your Honor” or “Judge.”

Each court has at least one bailiff who is a deputy sheriff and is there to maintain order. When you arrive for your hearing, let the bailiff know that you are present and ready. He or she will announce your case when it is time for your hearing, and will tell you where to sit and where to place your belongings as you enter the hearing room. A bailiff will usually remain inside the room during your hearing. If witnesses are called, the bailiff will step out to bring the witness into the hearing room.

At your hearing, be prepared to discuss any issues covered in your motion and be able to provide proof of any disputed facts by presenting evidence. Evidence is proof presented at a hearing in the form of witnesses (people), exhibits (documents), and objects (things). Not all evidence can be considered by the court, however. Evidence must conform to the Rules of Evidence in Chapter 90 of the Florida Statutes to be admissible in court. Remember, the duty of establishing the facts that you want to present to the court is on YOU. You should provide the court with admissible evidence to support the claims in your motion and your statements in court. Telling your story may not be enough to have your motion granted.

USUALLY YOU WILL BE NOTIFIED OF THE COURT’S DECISION AT THE HEARING AND THE WRITTEN ORDER OR RECOMMENDED ORDER WILL BE MAILED TO YOU.

STEP EIGHT – Notifying the Obligor’s Employer

Once you receive the signed IWO from the Judge, forward a copy of the IWO, the Notice to Payor (Form 12.996(b)) and the Notice of Filing Return Receipt (Form 12.996(c)) to the Obligor’s employer.

Family Forms and Packets - available for purchase at the Court Business Center

Form Packets with Instructions:

- 1) Complete packets with all forms and self-help instructions are priced individually and available at the Court Business Center (CBC), in Room 630 (6th Floor) of the George Edgecomb Courthouse, 800 E. Twiggs Street, Tampa, Florida.
- 2) Free online at:
 - a) www.fljud13.org/Portals/0/Forms/pdfs/family/packetList.pdf
 - b) www.hillsclerk.com/publicweb/forms.aspx#FamilyLaw → then click on “Family Law”

Individual Forms (may not include necessary instructions):

- 1) For \$.10 per page at the Court Business Center (CBC), in Room 630 (6th Floor) of the George Edgecomb Courthouse, 800 E. Twiggs Street, Tampa, Florida.
- 2) Free online at: www.flcourts.org → then click on “Family Law Forms”

YOU MAY FILE FORMS AT THE FOLLOWING LOCATIONS:

Tampa - George Edgecomb Courthouse – Main Location

Clerk of the Circuit Court, 800 E. Twiggs Street, Room 101, Tampa, FL 33602

Brandon – Brandon Regional Service Center

Clerk of the Circuit Court, 311 Pauls Drive, Suite 110, Brandon, FL 33511

Plant City – Plant City Courthouse

Clerk of the Circuit Court, 301 N. Michigan, Room 1071, Plant City, FL 33563

Ruskin/Sun City – SouthShore Regional Service Center

Clerk of the Circuit Court, 410 30th Street SE, Ruskin, FL 33570

**CIRCUITO JUDICIAL NÚMERO TRECE
DIVISIÓN DE DERECHO DE FAMILIA**

**MOCIÓN PARA ÓRDEN DE RETENCIÓN DE
INGRESOS (IWO) (anteriormente llamada Orden de
Deducción de Ingreso)
(Paquete #43)**

Este paquete solamente debe ser usado si existe una orden del Condado de Hillsborough para Alimentos y/o Pensión Alimentaria de Cónyuge

Si usted decide representarse a usted mismo (pro se) en su caso, usted debe estar consciente de que deberá seguir las mismas reglas establecidas para las personas representadas por abogados. El juez asignado para su caso no necesariamente tendrá que otorgarle lo que usted solicite en un formulario. Es posible que usted no pueda modificar el resultado del caso si no está de acuerdo con este. Si tiene preguntas o inquietudes sobre su caso usted debe consultar un abogado.

Si no conoce a un abogado, puede comunicarse al Servicio de Remisión de Abogados (*Lawyer Referral Service*) al 221-7780. Si usted no tiene dinero para contratar a un abogado, puede solicitar asistencia a *Bay Area Legal Services* llamando al 232-1343. También puede solicitar información legal en el Centro de Información Legal (*Legal Information Center*) de la Corte George Edgecomb (llame al 864-2280 para horarios e información).

Todas las instrucciones y formularios distribuidos por el Circuito Judicial Número Trece son provistas como un servicio público para las personas que buscan representarse a sí mismas en la corte sin la asistencia de un abogado. Estos documentos son solamente una guía y ayuda para los casos de los litigantes *pro se* (que se representan a sí mismos). El Circuito Judicial Número Trece no le garantiza que las instrucciones o las formas resultarán en el desenlace deseado para las partes ni que un juez en particular seguirá los procedimientos textualmente o que aceptará cada uno o la totalidad de los formularios tal y como fueron escritos. Cualquier persona que utilice estas instrucciones o formularios, lo hace bajo su propio riesgo y el Circuito Judicial Número Trece no se hará responsable por pérdidas ocasionadas a persona alguna que use estas instrucciones y/o formularios.

En ningún caso la Corte Suprema de la Florida, la Barra de Florida (*Florida Bar*), o cualquiera que contribuya a la creación de estos formularios, comentarios, y apéndices será responsable por el daño directo, indirecto o consecuencial que su uso pueda causar.

<u>FORMULARIOS INCLUIDOS EN ESTE PAQUETE</u>	<u>FORMULARIO #</u>	<u>CUANDO USARLO</u>
Información General para Personas que se representan a sí mismas	Apéndice C	Únicamente para su información
12 Reglas de Civismo en la Corte	12 Reglas	Necesarias para iniciar un proceso
Declaración de que no se es Abogado	12.900(a)	Necesaria si una persona que no es abogado le ayuda con los formularios
Moción Conjunta para IWO	Moción Conjunta	Use si la otra parte está de acuerdo con la Orden de Retención de Ingresos
Moción para IWO	Moción	Use si la otra parte no está de acuerdo con la Orden de Retención de Ingresos
Orden de Retención de Ingresos (IWO)	OMB 0970-0154	Necesaria
Aviso al Pagador (<i>Notice to Payor</i>)	12.996(b)	Necesario
Aviso de Radicación de Devolución de Recibo	12.996(c)	Necesario
Adenda de Florida a IWO	12.996(d)	Necesario
Anexo A	Anexo A	Necesario
Moción para la Referencia al Magistrado General	12.920(a)	Necesaria para casos relacionados con Pensión Alimentaria de Cónyuges
División de Magistrado General/ Oficial de Audiencia/Tabla de Asignaciones	Tabla	Para determinar el magistrado general/Oficial de audiencia asignado a su caso
Notificación de Audiencia	12.923	Utilizar cuando haya sido fijada una fecha para audiencia

<u>FORMULARIOS INCLUIDOS EN ESTE PAQUETE</u>	<u>FORMULARIO #</u>	<u>CUANDO USARLO</u>
Lista de Tarifas para Casos de Derecho de Familia	Tarifas	Lista de Tarifas para Casos relacionados con derecho de familia.
Notificación de Información Confidencial contenida en documentos radicados.	2.40(d)(2)	Para alertar al escribano de la corte (Clerk) de la existencia de información confidencial.

INSTRUCCIONES PASO A PASO
SI LA CONTRAPARTE ESTÁ DE ACUERDO CON LA ORDEN DE DEDUCCIÓN Y ESTÁ DISPUESTA A FIRMAR LA MOCIÓN CONJUNTA, SIGA LOS SIGUIENTES PASOS:

PRIMER PASO - Completar los formularios para iniciar el proceso y adelantar trámite notarial

- **LOS FORMULARIOS DEBEN SER COMPLETADOS Y FIRMADOS EN TINTA NEGRA Y LA MAYORÍA DEBEN SURTIR TRÁMITE NOTARIAL.** La oficina del escribano (*clerk's office*) adelantará el trámite notarial por una tarifa (ver la lista de cargos anexa). Por favor lleve una identificación válida.
- **Los nombres deben ser escritos de la misma manera en todos los documentos (no nombres completos en una forma y las iniciales en otra).**
- **SU NÚMERO DE SU CASO Y LA DIVISIÓN deben estar escritos en todos los documentos.**
- **Complete las siguiente formas y adelante el trámite notarial en aquellas provean una línea para la firma del notario:**
 - A) 12 Reglas de Civismo en la Corte (no es necesario el trámite notarial)
 - B) Moción Conjunta para IWO - (debe ser firmada y surtir trámite notarial por ambas partes). **Anexe una copia de la orden de manutención.**
 - C) Notificación de Información Confidencial, Formulario 2.40(d)(2)

SEGUNDO PASO - Hacer las Copias

Después de completar las formas, firmarlas y completar el trámite notarial, haga 2 copias de todo lo que haya firmado (una es para su archivo y la otra es para la contraparte). Si su caso involucra al *Department of Revenue, Office of Child Support Enforcement*, haga otra copia del paquete para la *Office of Child Support Enforcement*. Las copias pueden ser obtenidas por una tarifa en el Centro de Negocios de la Corte (*Court Business Center*), en el sexto piso de la Corte George Edgecomb.

TERCER PASO - Radicar su Moción

Lleve lo siguiente a la oficina del escribano (*clerk*) en el 1er piso de la corte principal y pague los cargos:

1. La Moción Conjunta *original* completa y firmada con una copia de la orden de manutención anexa
2. Orden de Retención de Ingresos (IWO), formulario OMB 0970-0154
3. Adenda de Florida a IWO, formulario 12.996(d)
4. Anexo A / Hoja de Información de Pagos
5. Dos sobres estampillados - uno dirigido a usted, otro dirigido a la contraparte.

USTED RECIBIRÁ UNA COPIA DE LA ORDEN FIRMADA POR CORREO.

CUARTO PASO - Notificar al Empleador del Obligado

Una vez que reciba el IWO firmado por el Juez, reenvíe una copia del IWO, Adenda de Florida a IWO, Aviso al Pagador, y del Aviso de Radicación de Devolución de Recibo al empleador del Obligado.

INSTRUCCIONES PASO A PASO

SI LA CONTRAPARTE NO ESTÁ DE ACUERDO CON LA ORDEN DE DEDUCCIÓN O NO ESTÁ DISPUESTA A FIRMAR LA MOCIÓN CONJUNTA, SIGA LOS SIGUIENTES PASOS:

PRIMER PASO - Completar los formularios para iniciar el proceso y adelantar trámite notarial

- **LOS FORMULARIOS DEBEN SER COMPLETADOS Y FIRMADOS EN TINTA NEGRA Y LA MAYORÍA DEBEN SURTIR TRÁMITE NOTARIAL.** La oficina del escribano (*clerk's office*) adelantará el trámite notarial por una tarifa (ver la lista de cargos anexa). Por favor lleve una identificación válida.
- **Los nombres deben ser escritos de la misma manera en todos los documentos (no nombres completos en una forma y las iniciales en otra).**
- **SU NÚMERO DE SU CASO Y LA DIVISIÓN deben estar escritos en todos los documentos.**
- **Complete las siguiente formas y adelante el trámite notarial en aquellas provean una línea para la firma del notario:**
 - A) 12 Reglas de Civismo en la Corte (no es necesario el trámite notarial)
 - B) Moción para Orden de Retención de Ingresos - (debe ser firmada y surtir trámite notarial). **Anexe una copia de la orden de manutención.**

Si usted está buscando un IWO para PENSIÓN ALIMENTARIA DE CÓNYUGE (ALIMONY), complete el siguiente formulario adicional:

C) Moción de Referencia al Magistrado General, Formulario 12.920(a)

SEGUNDO PASO - Hacer las Copias

Después de completar las formas, firmarlas y completar el trámite notarial, haga 2 copias de todo lo que haya firmado (una es para su archivo y la otra es para la contraparte). Si está radicando una Moción de Referencia al Magistrado General, haga una copia extra de esto y una copia extra de la Moción para IWO. Si su caso involucra al *Department of Revenue, Office of Child Support Enforcement*, haga otra copia del paquete para la *Office of Child Support Enforcement*. Las copias pueden ser obtenidas por una tarifa en el Centro de Negocios de la Corte (*Court Business Center*), en el sexto piso de la Corte George Edgecomb.

TERCER PASO - Radicar su Moción

Lleve el paquete *original* de los formularios completos y firmados al escribano (*clerk*) en el 1er piso de la George Edgecomb Courthouse y pague los cargos, si aplican.

CUARTO PASO - Notificar la contraparte

Envíe por correo, fax o entregue personalmente un juego de copias de sus documentos a la contraparte. Si su caso involucra al *Department of Revenue, Office of Child Support Enforcement*, envíe por correo un juego de copias a la siguiente dirección: Department of Revenue, Office of Child Support Enforcement, 6302 Martin Luther King Jr. Blvd., Suite 110, Tampa, Florida 33619.

QUINTO PASO - Procesar la Orden de Referencia al Magistrado General?

1. Si usted está radicando una “Moción de Referencia al Magistrado General” (si su Moción busca obtener un IWO por alimentos para pensión alimentaria de cónyuge), envíe al Juez asignado a su caso las siguientes formas por correo:
 - a. 1 copia de la Moción para IWO
 - b. 1 copia de la Moción de Referencia al Magistrado General,
 - c. 2 sobres estampillados, uno dirigido a cada parte (los sobres y las estampillas pueden ser comprados en el Centro de Negocios de la Corte (*Court Business Center*) ubicado en el 6to piso de la Corte Edgecomb)
2. Si su caso es asignado a un juez en Tampa, envíe por correo sus documentos y sobres a: Judge of Division _____, George Edgecomb Courthouse, 800 E. Twiggs Street, 4th Floor, Tampa, Florida 33602.
3. Si su caso es asignado a un juez en Plant City, (División R, S o T), envíe por correo sus documentos y sobres a: Judge of Division _____, Plant City Courthouse, 301 N. Michigan Avenue, Plant City, Florida 33563,
4. La División de su caso la encuentra junto al número de su caso.
5. Si la Moción de Referencia al Magistrado General no va acompañada por 2 sobres con las respectivas direcciones y estampillas, su Referencia no será tramitada y su caso sufrirá retrasos.

SEXTO PASO - Programar la audiencia

1. Llame al asistente del magistrado general/oficial de audiencia asignado a su caso y solicite una fecha para audiencia. El magistrado general se asigna con base en **los dos últimos dígitos del número de su caso** (vea la tabla adjunta).
 - Si es asignado al GM-1, llame al Magistrado General/Oficial de Audiencia **Cuellar-Stilo** (teléfono 272-5351)
 - Si es asignado al GM-2, llame al Magistrado General/Oficial de Audiencia **Johnson** (teléfono 276-2335)
 - Si es asignado al GM-3, llame al Magistrado General/Oficial de Audiencia **Montagno** (teléfono 276-2337)
 - Si es asignado al GM-4, llame al Magistrado General/Oficial de Audiencia **Proctor** (teléfono 272-6435)
2. Una vez la fecha de la audiencia sea fijada, complete una Notificación de Audiencia, Formulario 12.923, con el lugar, fecha y hora de la audiencia.
3. Firme la Notificación de Audiencia y complete la parte del Certificado de Notificación que establece la fecha en la que está radicando la notificación y la manera como le va a proveer una copia a la contraparte.
4. Haga 2 copias de la Notificación de Audiencia.
5. Radique el original de la Notificación de Audiencia con el escribano (*clerk*), envíe una copia de la notificación a la contraparte, y guarde una copia para su archivo personal.

SÉPTIMO PASO - La audiencia

Traiga los siguientes documentos a su audiencia:

1. Una copia de la orden de manutención
2. La Orden de Retención de Ingresos (IWO), formulario OMB 0970-0154
3. Adenda de Florida a IWO, formulario 12.996(d)
4. Anexo A/ Hoja de Información de Pagos
5. Registros de pagos, si hay alguno
6. Dos sobres estampillados - uno dirigido a usted, otro dirigido a la contraparte.

Normalmente en la audiencia es cuando se decidirá la petición de su moción.

CÓMO VESTIRSE - Vístase apropiadamente. No use pantalones cortos (*shorts*), camisetas sin mangas (*tank tops*) o sandalias. No mastique chicle.

QUÉ ESPERAR

La audiencia tendrá lugar en una sala de audiencia o sala de la corte. Usted no estará frente a un jurado, solamente frente a un magistrado general o juez. No interrumpa al magistrado general o juez cuando el o ella hable. Cuando se dirija al juez, llámelo/a “Honorable” (“Your Honor”) o “Juez” (“Judge”).

Cada corte tiene por lo menos un alguacil que es un ayudante de sheriff y se encuentra allí para mantener el orden. Cuando usted llegue para la audiencia deje que el alguacil sepa que usted

está presente y listo. El o ella anunciará su caso cuando llegue el momento de su audiencia y le informará donde sentarse y en donde acomodar sus pertenencias cuando entre a la sala de audiencias. Por lo general un alguacil permanecerá dentro de la sala durante su audiencia. Si se llaman testigos, el alguacil saldrá a buscarlos para traerlos a la sala de audiencia.

Durante su audiencia, esté preparado para discutir cualquiera de los asuntos de que trate la petición y esté listo para presentar pruebas de cualquiera de los hechos por medio de evidencias. Evidencias son pruebas presentadas durante una audiencia bajo la forma de testigos (personas), documentos (papeles), u objetos (cosas). Sin embargo, el juez no puede tener en cuenta toda la evidencia. Las pruebas deben estar conforme a las Reglas de Evidencia del Capítulo 90 de las Leyes de Florida para ser admisibles en corte. Recuerde que USTED tiene el deber de establecer los hechos que quiere presentar ante la corte. Usted debe presentarle al juez evidencia admisible como soporte de las reclamaciones en su petición y de sus afirmaciones en la corte. Contar su historia, simplemente, puede no ser suficiente para ganar su caso.

USUALMENTE LE NOTIFICARÁN LA DECISIÓN DE LA CORTE DURANTE LA AUDIENCIA Y LA ORDEN ESCRITA O LA ORDEN RECOMENDADA LE SERÁ ENVIADA POR CORREO.

OCTAVO PASO - La audiencia

Una vez que usted reciba el IWO firmado por el Juez, remita una copia del IWO, de la Notificación al Pagador (Formulario 12.996(b)) y del Aviso de Radicación de Devolución de Recibo (Formulario 12.996(c)) al empleador del Obligado.

Formularios y Paquetes de Familia - disponibles para compra en el Court Business Center

Paquetes de Formularios con Instrucciones:

- 1) Paquetes completos con todos los formularios e instrucciones de auto-ayuda se encuentran disponibles para compra, a precios individuales, en el Court Business Center (CBC), Oficina 630 (Piso 6°) de la corte George Edgecomb, 800 E. Twiggs Street, Tampa, Florida.
- 2) Gratis en línea en:
 - a) www.fljud13.org/Portals/0/Forms/pdfs/family/packetList.pdf
 - b) www.hillsclerk.com/publicweb/forms.aspx#FamilyLaw → y luego clic en “Family Law”

Formularios Individuales (no siempre incluyen las instrucciones necesarias):

- 1) A 10 centavos por página en el Court Business Center (CBC), Oficina 630 (Piso 6°) de la corte George Edgecomb, 800 E. Twiggs Street, Tampa, Florida.
- 2) Gratis en línea en: www.flcourts.org → y luego clic en “Family Law Forms”

FAMILY LAW FORMS, COMMENTARY, AND INSTRUCTIONS GENERAL INFORMATION FOR SELF-REPRESENTED LITIGANTS (12/10)

You should read this General Information thoroughly before taking any other steps to file your case or represent yourself in court. Most of this information is **not** repeated in the attached forms. This information should provide you with an overview of the court system, its participants, and its processes. It should be useful whether you want to represent yourself in a pending matter or have a better understanding of the way family court works. **This is not intended as a substitute for legal advice from an attorney. Each case has its own particular set of circumstances, and an attorney may advise you of what is best for you in your individual situation.**

These instructions are not the only place that you can get information about how a family case works. You may want to look at other books for more help. The Florida Statutes, Florida Family Law Rules of Procedure, Florida Rules of Civil Procedure, and other legal information or books may be found at the public library or in a law library at your county courthouse or a law school in your area. If you are filing a petition for **Name Change** and/or **Adoption**, these instructions may not apply.

If the word(s) is printed in **bold**, this means that the word is being emphasized. Throughout these instructions, you will also find words printed in **bold** and **underlined**. This means that the definitions of these words may be found in the glossary of common family law terms at the end of this general information section.

Commentary

1995 Adoption. To help the many people in family law court cases who do not have attorneys to represent them (pro se litigants), the Florida Supreme Court added these simplified forms and directions to the Florida Family Law Rules of Procedure. The directions refer to the Florida Family Law Rules of Procedure or the Florida Rules of Civil Procedure. Many of the forms were adapted from the forms accompanying the Florida Rules of Civil Procedure. Practitioners should refer to the committee notes for those forms for rule history.

The forms were adopted by the Court pursuant to *Family Law Rules of Procedure*, 667 So. 2d 202 (Fla. 1995); *In re Petition for Approval of Forms Pursuant to Rule 10-1.1(b) of the Rules Regulating the Florida Bar—Stepparent Adoption Forms*, 613 So. 2d 900 (Fla. 1992); *Rules Regulating the Florida Bar—Approval of Forms*, 581 So. 2d 902 (Fla. 1991).

Although the forms are part of these rules, they are not all inclusive and additional forms, as necessary, should be taken from the Florida Rules of Civil Procedure as provided in Florida Family Law Rules of Procedure. Also, the following notice has been included to strongly encourage individuals to seek the advice, when needed, of an attorney who is a member in good standing of the Florida Bar.

1997 Amendment. In 1997, the Florida Family Law Forms were completely revised to simplify and correct the forms. Additionally, the appendices were eliminated, the instructions contained in the appendices were incorporated into the forms, and the introduction following the Notice to Parties was created. Minor changes were also made to the Notice to Parties set forth below.

NOTICE TO PARTIES WHO ARE NOT REPRESENTED BY AN ATTORNEY WHO IS A MEMBER IN GOOD STANDING OF THE FLORIDA BAR

If you have questions or concerns about these forms, instructions, commentary, the use of the forms, or your legal rights, it is strongly recommended that you talk to an attorney. If you do not know an attorney, you should call the lawyer referral service listed in the yellow pages of the telephone book under "Attorney." If you do not have the money to hire an attorney, you should call the legal aid office in your area.

Because the law does change, the forms and information about them may have become outdated. You should be aware that changes may have taken place in the law or court rules that would affect the accuracy of the forms or instructions.

In no event will the Florida Supreme Court, The Florida Bar, or anyone contributing to the production of these forms or instructions be liable for any direct, indirect, or consequential damages resulting from their use.

FAMILY LAW PROCEDURES

Communication with the court Ex parte communication is communication with the judge with only one party present. Judges are not allowed to engage in ex parte communication except in very limited circumstances, so, absent specific authorization to the contrary, you should not try to speak with or write to the judge in your case unless the other party is present or has been properly notified. **If you have something you need to tell the judge, you must ask for a hearing and give notice to the other party or file a written statement in the court file and send a copy of the written statement to the other party.**

Filing a case. A case begins with the filing of a petition. A petition is a written request to the court for some type of legal action. The person who originally asks for legal action is called the petitioner and remains the petitioner throughout the case.

A petition is given to the clerk of the circuit court, whose office is usually located in the county courthouse or a branch of the county courthouse. A case number is assigned and an official court file is opened. Delivering the petition to the clerk's office is called filing a case. A filing fee is usually required.

Once a case has been filed, a copy must be given to (served on) the respondent. The person against whom the original legal action is being requested is called the respondent, because he or she is expected to respond to the petition. The respondent remains the respondent throughout the case.

Service. When one party files a petition, motion, or other pleading, the other party must be "served" with a copy of the document. This means that the other party is given proper notice of the pending action(s) and any scheduled hearings. Personal service of the petition and summons on the respondent by a deputy sheriff or private process server is required in all original petitions and supplemental petitions, unless constructive service is permitted by law. Personal service may also be required in other actions by some judges. After initial service of the original or supplemental petition and summons by a deputy sheriff or private process server, service of most motions and other documents or papers filed in the case generally may be made by regular U.S. mail or hand delivery. However, service by

certified mail is required at other times so you have proof that the other party actually received the papers. The instructions with each form will advise you of the type of **service** required for that form. **If the other party is represented by an attorney, you should serve the attorney and send a copy to the other party, except for original or supplemental petitions, which must be personally served on the respondent.**

Other than the initial original or supplemental petitions, anytime you file additional pleadings or motions in your case, you must provide a copy to the other party and include a **certificate of service**. Likewise, the other party must provide you with copies of everything that he or she files. Service of additional documents is usually completed by U.S. mail. For more information, see the instructions for **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914.

Forms for service of process are included in the Florida Family Law Forms, along with more detailed instructions and information regarding service. The instructions to those forms should be read carefully to ensure that you have the other party properly served. **If proper service is not obtained, the court cannot hear your case.**

Note: If you absolutely do not know where the other party to your case lives or if the other party resides in another state, you may be able to use **constructive service**. However, if constructive service is used, other than granting a divorce, the court may only grant limited relief. For more information on constructive service, see **Notice of Action for Dissolution of Marriage**, Florida Supreme Court Approved Family Law Form 12.913(a), and **Affidavit of Diligent Search and Inquiry**, Florida Family Law Rules of Procedure Form 12.913(b). Additionally, 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). In sum, the law regarding constructive service and service on an individual in the military service is very complex and you may wish to consult an attorney regarding these issues.

Default... After being served with a petition or **counterpetition**, the other party has 20 days to file a response. If a response to a petition is not filed, the petitioner may file a **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a), with the clerk. This means that you may proceed with your case and set a **final hearing**, and a **judge** will make a decision, even if the other party will not cooperate. For more information, see rule 12.080(c), Florida Family Law Rules of Procedure.

Answer and Counterpetition... After being served, the respondent has 20 days to file an answer admitting or denying each of the allegations contained in the petition. In addition to an answer, the respondent may also file a counterpetition. In a counterpetition, the respondent may request the same or some other relief or action not requested by the petitioner. If the respondent files a counterpetition, the petitioner should then file an **Answer to Counterpetition**, Florida Supreme Court Approved Family Law Form 12.903(d), and either admit or deny the allegations in the respondent's counterpetition.

Mandatory disclosure... Rule 12.285, Florida Family Law Rules of Procedure, requires each party in a **dissolution of marriage** to exchange certain information and documents, and file a **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c). Failure to make this required disclosure within the time required by the Florida Family Law Rules of Procedure may allow the court to dismiss the case or to refuse to consider the pleadings of the party failing to comply. This requirement also must be met in other family law cases, **except** adoptions, simplified dissolutions of marriage, enforcement proceedings, contempt proceedings, and proceedings for injunctions for domestic or repeat violence. The **Certificate of Compliance with Mandatory Disclosure**, Florida Family Law Rules of Procedure Form 12.932, lists the documents that must be given to the other party. For more information see rule 12.285, Florida Family Law Rules of Procedure, and the instructions to the

Certificate of Compliance with Mandatory Disclosure, Florida Family Law Rules of Procedure Form 12.932.

Parenting Plan. If your case involves minor or dependent child(ren), a **Parenting Plan** shall be approved or established by the court. **Parenting Plan**, Florida Supreme Court Approved Family Law Form, 12.995(a) or **Safety-Focused Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(b). The Parenting Plan shall be developed and agreed to by the parents and approved by a court . **If the parents cannot agree, or if the agreed Parenting Plan is not approved, the court must establish a Parenting Plan** . The Parenting Plan shall contain a time-sharing schedule and should address the issues regarding the child(ren)'s education, health care, and physical, social, and emotional well-being.

Setting a hearing or trial. Generally, the court will have hearings on motions, final hearings on **uncontested** or **default** cases, and trials on contested cases. Before setting your case for **final hearing** or 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 jurisdiction. For further information, you should refer to the instructions for the type of form you are filing.

Next, you must obtain a hearing or trial date so that the court may consider your request. You should ask the clerk of court, or **family law intake staff** about the local procedure for setting a hearing or trial, which you should attend. These family law forms contain **orders** and **final judgments**, which the judge may use. You should ask the clerk of court or family law intake staff 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.

Below are explanations of symbols or parts of different family law forms...

{specify}, {date}, {name(s)}, {street}, {city}, {state}, {phone}

Throughout these forms, you will find hints such as those above. These tell you what to put in the blank(s).

[one only] [all that apply]

These show how many choices you should check. Sometimes you may check only one, while other times you may check several choices. () This also shows an area where you must make a choice. Check the () in front of the choice that applies to you or your case.

IN THE CIRCUIT COURT OF THE _____ (1) _____ JUDICIAL CIRCUIT,
IN AND FOR _____ (2) _____ COUNTY, FLORIDA

Case No.: _____ (3)
Division: _____ (4)

_____, (5)
Petitioner,
and
_____, (6)
Respondent.

Line 1 The clerk of court can tell you the number of your judicial circuit. Type or print it here.

- Line 2** Type or print your county name on line (2).
- Line 3** If you are filing an initial petition or pleading, the Clerk of the Court will assign a case number after the case is filed. You should type or print this case number on all papers you file in this case.
- Line 4** The clerk of the court can tell you the name of the division in which your case is being filed, and you should type or print it here. Divisions vary from court to court. For example, your case may be filed in the civil division, the family division, or the juvenile division.
- Line 5** Type or print the legal name of the person who originally filed the case on line 5. This person is the petitioner because he/she is the one who filed the original petition.
- Line 6** Type or print the other party's legal name on line 6. The other party is the respondent because he/she is responding to the petition.

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: _____	_____
	(1) (2)
	Signature of Petitioner
	Printed Name: _____
	(3)
	Address: _____
	(4)
	City, State, Zip: _____
	(5)
	Telephone Number: _____
	(6)
	Fax Number: _____
	(7)

Some forms require that your signature be witnessed. You must sign the form in the presence of a **notary public** or deputy clerk (employee of the clerk of the court's office). When signing the form, you must have a valid photo identification unless the notary knows you personally. You should completely fill in all lines (1 & 3–7) except 2 with the requested information, if applicable. **Line 2, the signature line, must be signed in the presence of the notary public or deputy clerk.**

STATE OF FLORIDA
COUNTY OF _____

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

NOTARY PUBLIC or DEPUTY CLERK

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

____ Personally known
____ Produced identification
Type of identification produced _____

DO NOT SIGN OR FILL IN THIS PART OF ANY FORM. This section of the form is to be completed by the notary public who is witnessing your signature.

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} _____ (2) _____, {city} _____
{state} _____ (4) _____, {phone} _____ (5) _____, helped {name} _____ (6) _____,
who is the petitioner, fill out this form.

This section should be completed by anyone who helps you fill out these forms but is **not** an attorney who is a member in good standing of The Florida Bar, which means that he or she is not licensed to practice law in Florida.

- Line 1** The **nonlawyer** who helps you should type or print his or her name on line 1.
Lines 2–5 The nonlawyer’s address and telephone number should be typed or printed on lines 2–5.
Line 6 Your name should be typed or printed on line 6.

In addition, a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), should be completed if a nonlawyer assists you. The disclosure is available as a family law form and should be completed before the nonlawyer helps you. This is to be sure that you understand the role and limitations of a nonlawyer. You and the nonlawyer should keep a copy of this disclosure for your records.

FAMILY LAW GLOSSARY OF COMMON TERMS AND DEFINITIONS

Note: The following definitions are intended to be helpful, BUT they are not intended to constitute legal advice or address every possible meaning of the term(s) contained in this glossary.

Affidavit - a written statement in which the facts stated are sworn or affirmed to be true.

Answer - written response by a respondent that states whether he or she admits (agrees with) or denies (disagrees with) the allegations in the petition. Any allegations not specifically denied are considered to be admitted.

Appeal - asking a district court of appeal to review the decision in your case. There are strict procedural and time requirements for filing an appeal.

Asset - everything owned by you or your spouse, including property, cars, furniture, bank accounts, jewelry, life insurance policies, businesses, or retirement plans. An asset may be marital or nonmarital, but that distinction is for the court to determine if you and your spouse do not agree.

Attorney - a person with special education and training in the field of law who is a member in good standing of The Florida Bar and licensed to practice law in Florida. An attorney is the only person who is allowed to give you legal advice. An attorney may file your case and represent you in court, or just advise you of your rights before you file your own case. In addition to advising you of your rights, an attorney may tell you what to expect and help prepare you for court. In family law matters, you are not entitled to a court-appointed lawyer, like a public defender in a criminal case. However, legal assistance is often available for those who are unable to hire a private attorney. You may consult the yellow pages of the telephone directory for a listing of legal aid or lawyer referral services in your area, or ask your local clerk of court or family law intake staff what services are available in your area. You may also obtain information from the Florida Supreme Court's Internet site located at <http://www.flcourts.org>.

Bond - money paid to the clerk of court by one party in a case, to be held and paid to an enjoined party in the event that the first party causes loss or damage of property as a result of wrongfully enjoining the other party.

Central Governmental Depository - the office of the clerk of court that is responsible for collecting and disbursing court-ordered alimony and child support payments. The depository also keeps payment records and files judgments if support is not paid.

Certificate of Service - a document that must be filed whenever a form you are using does not contain a statement for you to fill in showing to whom you are sending copies of the form. Florida Supreme Court Approved Family Law Form 12.914 is the certificate of service form and contains additional instructions.

Certified Copy - a copy of an order or final judgment, certified by the clerk of the circuit court to be an authentic copy.

Certified Mail - mail which requires the receiving party to sign as proof that they received it.

Child Support - money paid from one parent to the other for the benefit of their dependent or minor child(ren).

Clerk of the Circuit Court - elected official in whose office papers are filed, a case number is assigned, and case files are maintained. The clerk's office usually is located in the county courthouse.

Constructive Service - notification of the other party by newspaper publication or posting of notice at designated places when the other party cannot be located for personal service. You may also be able to use constructive service when the other party lives in another state. Constructive service is also called “service by publication.” However, when constructive service is used, the relief the Court may grant is limited. For more information on service, see the instructions for Florida Family Law Rules of Procedure Forms 12.910(a) and 12.913(b) and Florida Supreme Court Approved Family Law Form 12.913(a).

Contested Issues - any or all issues upon which the parties are unable to agree and which must be resolved by the judge at a hearing or trial.

Contingent Asset - an asset that you **may** receive or get later, such as income, tax refund, accrued vacation or sick leave, a bonus, or an inheritance.

Contingent Liability - a liability that you **may** owe later, such as payments for lawsuits, unpaid taxes, or debts that you have agreed or guaranteed to pay if someone else does not.

Counterpetition - a written request to the court for legal action, which is filed by a respondent after being served with a petition.

Custody Order – a judgment or order incorporating a 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. ss. 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.

Default - a failure of a party to respond to the pleading of another party. This failure to respond may allow the court to decide the case without input from the party who did not appear or respond.

Delinquent - late.

Dependent Child(ren) - child(ren) who depend on their parent(s) for support either because they are under the age of 18, they have a mental or physical disability that prevents them from supporting themselves, or they are in high school while between the ages of 18 and 19 and are performing in good faith with reasonable expectation of graduation before the age of 19.

Deputy Clerk - an employee of the office of the clerk of court, which is usually located in the county courthouse or a branch of the county courthouse.

Dissolution of Marriage - divorce; a court action to end a marriage.

Electronic Communication – Contact, other than face-to-face contact, facilitated by tools such as 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 fact-to face contact between a parent and that parent’s minor child.

Enjoined - prohibited by the court from doing a specific act.

Ex Parte - communication with the judge by only one party. In order for a judge to speak with either party, the other party must have been properly notified and have an opportunity to be heard. If you have something you wish to tell the judge, you should ask for a hearing or file information in the clerk of court’s office, with certification that a copy was sent to the other party.

Family Law Intake Staff - a court’s employee(s) who is (are) available to assist you in filing a family law case. Family law intake staff are not attorneys and cannot give legal advice. They may only assist you with filling out the form(s). Your local clerk’s office can tell you if your county has such assistance available.

Filing - delivering a petition, response, motion, or other pleading in a court case to the clerk of court’s office.

Filing Fee - an amount of money, set by law, that the petitioner must pay when filing a case. If you cannot afford to pay the fee, you must file an **Application for Determination of Civil Indigent Status**, to ask the clerk to file your case without payment of the fee. This form can be obtained from the clerk's office.

Final Hearing - trial in your case.

Financial Affidavit - a sworn statement that contains information regarding your income, expenses, assets, and liabilities.

Final Judgment - a written document signed by a judge and recorded in the clerk of the circuit court's office that contains the judge's decision in your case.

Guardian ad Litem - a neutral person who may be appointed by the court to evaluate or investigate your child's situation, and file a report with the court about what is in the best interests of your child(ren). Guardians do not "work for" either party. The guardian may interview the parties, visit their homes, visit the child(ren)'s school(s) and speak with teachers, or use other resources to make their recommendation.

Hearing - a legal proceeding before a judge or designated officer (general magistrate or hearing officer) on a motion.

Health Insurance-coverage under a fee-for-service arrangement, health care maintenance organization, or preferred provider organization, and other types of coverage available to either parent, under which medical services could be provided to a minor or dependent child.

Judge - an elected official who is responsible for deciding matters on which you and the other parties in your case are unable to agree. A judge is a neutral person who is responsible for ensuring that your case is resolved in a manner which is fair, equitable, and legal. **A judge is prohibited by law from giving you or the other party any legal advice, recommendations, or other assistance, and may not talk to either party unless both parties are present, represented, or at a properly scheduled hearing.**

Judicial Assistant - the judge's personal staff assistant.

Liabilities - everything owed by you or your spouse, including mortgages, credit cards, or car loans. A liability may be marital or nonmarital, but that distinction is for the court to determine if you and your spouse do not agree.

Lump Sum Alimony - money ordered to be paid by one spouse to another in a limited number of payments, often a single payment.

Mandatory Disclosure - items that must be disclosed by both parties except those exempted from disclosure by Florida Family Law Rule 12.285.

Marital Asset - generally, anything that you and/or your spouse acquired or received (by gift or purchase) during the marriage. For example, something you owned before your marriage **may** be nonmarital. An asset may only be determined to be marital by agreement of the parties or determination of the judge.

Marital Liability - generally, any debt that you and/or your spouse incurred during the marriage. A debt may only be determined to be nonmarital by agreement of the parties or determination of the judge.

Mediator - a person who is trained and certified to assist parties in reaching an agreement before going to court. Mediators do not take either party's side and are not allowed to give legal advice. They are only responsible for helping the parties reach an agreement and putting that agreement into writing. In some areas, mediation of certain family law cases may be required before going to court.

Modification - a change made by the court in an order or final judgment.

Motion - a request made to the court, other than a petition.

No Contact - a court order directing a party not speak to, call, send mail to, visit, or go near his or her spouse, ex-spouse, child(ren), or other family member.

Nonlawyer - a person who is not a member in good standing of The Florida Bar.

Nonmarital Asset - generally, anything owned separately by you or your spouse. An asset may only be determined to be nonmarital by either agreement of the parties or determination of the judge.

Nonmarital Liability - generally, any debt that you or your spouse incurred before your marriage or since your separation. A debt may only be determined to be nonmarital by either agreement of the parties or determination of the judge.

Nonparty - a person who is not the petitioner or respondent in a court case.

Notary Public - a person authorized to witness signatures on court related forms.

Obligee - a person to whom money, such as child support or alimony, is owed.

Obligor - a person who is ordered by the court to pay money, such as child support or alimony.

Order - a written decision signed by a judge and filed in the clerk of the circuit court's office, that contains the judge's decision on part of your case, usually on a motion.

Original Petition - see **Petition**.

Parenting Course - a class that teaches parents how to help their child(ren) cope with divorce and other family issues.

Parenting Plan – a document created to govern the relationship between the parents relating to the decisions that must be made regarding the minor child(ren). The Parenting Plan must contain a time-sharing schedule for the parents and child(ren) and shall address the issues concerning the minor child(ren). The issues concerning the minor child(ren) may include, but are not limited to, the child(ren)'s education, health care, physical, social, and emotional well-being. In creating the Plan, all circumstances between the parents, including their historic relationship, domestic violence, and other factors must be taken into consideration. The Parenting Plan must be developed and agreed to by the parents and approved by the court. If the parents 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**.

Parenting Plan Recommendation – A nonbinding recommendation concerning one or more elements of a parenting plan made by a court-appointed mental health practitioner or other professional designated pursuant to either section 61.20 or 61.401, Florida Statutes, or Florida Family Law Rule of Procedure 12.363.

Party - a person involved in a court case, either as a petitioner or respondent.

Paternity Action - A lawsuit used to determine whether a designated individual is the father of a specific child or children.

Payor - an employer or other person who provides income to an obligor.

Permanent Alimony - spousal support ordered to be paid at a specified, periodic rate until modified by a court order, the death of either party, or the remarriage of the Obligee, whichever occurs first.

Personal Service - when a summons and a copy of a petition (or other pleading) that has been filed with the court are delivered by a deputy sheriff or private process server to the other party. Personal service is required for all petitions and supplemental petitions.

Petition - a written request to the court for legal action, which begins a court case.

Petitioner - the person who files a petition that begins a court case.

Pleading - a formal written statement of exactly what a party wants the court to do in a lawsuit or court action.

Pro Se Litigant - a person who appears in court without the assistance of a lawyer.

Pro Se Coordinator - see **Family Law Intake Staff**.

Rehabilitative Alimony - spousal support ordered to be paid for a limited period of time to allow one of the parties an opportunity to complete a plan of education or training, according to a rehabilitative plan accepted by the court, so that he or she may better support himself or herself.

Respondent - the person who is served with a petition requesting some legal action against him or her.

Scientific Paternity Testing - a medical test to determine who is the father of a child.

Service - the delivery of legal documents to a party. This must be accomplished as directed by Florida Family Law Rules 12.070 and 12.080.

Shared Parental Responsibility - an arrangement under which both parents have full parental rights and responsibilities for their child(ren), and the parents make major decisions affecting the welfare of the child(ren) jointly. Shared Parental Responsibility is presumptive in Florida.

Sole Parental Responsibility - a parenting arrangement under which the responsibility for the minor child(ren) is given to one parent by the court, with or without rights of time-sharing to the other parent.

Supervised Time-Sharing- a parenting arrangement under which time-sharing between a parent and his or her child(ren) is supervised by either a friend, family member, or a supervised visitation center.

Supplemental Petition - a petition that may be filed by either party after the judge has made a decision in a case and a final judgment or order has been entered. For example, a supplemental petition may be used to request that the court modify the previously entered final judgment or order.

Time-Sharing Schedule – a timetable that must be included in the Parenting Plan that specifies the time, including overnights and holidays, that a minor child or children will spend with each parent. The time-sharing schedule shall either be developed and agreed to by the parents of a minor child or children and approved by the court, or established by the court if the parents cannot agree, or if their agreed-upon schedule is not approved by the court.

Trial - the final hearing in a contested case.

Uncontested - any and all issues on which the parties are able to agree and which are part of a marital settlement agreement.

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

Case No.: _____

Division _____

_____ ,

Petitioner,

and

_____ ,

Respondent.

**HILLSBOROUGH COUNTY FAMILY LAW DIVISION
THE TWELVE RULES OF COURTROOM CIVILITY**

The judges, general masters and hearing officers assigned to the Family Law Division in Hillsborough County expect that all litigants, whether or not they are represented by attorneys, will conduct themselves in an appropriate fashion so that all parties will be afforded a fair opportunity to present their case.

The following guidelines are meant to assist you in meeting appropriate standards of conduct when you appear in court.

1. Be truthful in all statements that you make to the court. False statements under oath constitute perjury which is a criminal offense.
2. Do not call or write to the judge. As a general rule, documents and testimony can be read or heard by the judge only in the presence of both parties.
3. Be courteous. Other than to make appropriate objections, do not interrupt anyone who is speaking. If you are representing yourself and you have an objection to something a witness says, merely say, "Objection" and the court will allow you to state the nature of your objection.
4. Treat all court personnel with respect, including bailiffs, judicial assistants, clerks, court investigators, judges, general masters and hearing officers.
5. Do not make faces or gestures at the opposing party, his or her attorney, witnesses or the judge while in the courtroom. Speak directly to the judge or your attorney, not the opposing party or a witness. You will be given an opportunity to be heard by the court.

6. Show your respect for the court by dressing appropriately and wearing clean clothes. Coats, ties, suits and dresses are welcome but not required. Shorts, blue jeans, t-shirts and sneakers are not appropriate.
7. Do not bring any food or beverage into the courtroom and do not chew gum or eat candy in the courtroom.
8. Do not bring children to the courthouse (except in adoption cases), unless the court has so ordered.
9. Be aware that witnesses you bring to court are not usually permitted to remain in the courtroom while you, your spouse or former spouse, or other witnesses testify.
10. Bring at least four (4) copies of any documents that you intend to offer into evidence.
11. All documents should be pre-marked with a case number, name, the date and a space for the judge to admit the document into evidence.
12. The courthouse is located in a congested area. Parking is limited and takes time. Plan your time so you can park and be available at least fifteen (15) minutes before the hearing is scheduled to begin.

I have read and acknowledge my responsibilities as a litigant.

Signature of Petitioner

Date

Signature of Respondent

Date

I have read and reviewed with my client his or her responsibilities as a litigant.

Signature of Attorney

Date

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

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 and the nonlawyer must keep a copy in the person's file. The nonlawyer must keep copies for at least six 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 THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH 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 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. {Name} _____, may not help me fill in the form and may not complete the form for me. 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.

[**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 THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA
FAMILY LAW DIVISION

_____,
Petitioner
and

CASE NO.: _____

_____,
Respondent

DIVISION: _____

JOINT MOTION FOR INCOME WITHHOLDING ORDER (IWO)

COMES NOW the Petitioner and Respondent, and request entry of an Income Withholding Order (IWO) in the above referenced case.

1. A () Final Judgment () Order for Support (check one) was entered in this case on _____
_____ (date) and ordered: (check all that apply)

_____ child support in the amount of \$ _____ per: month / week / bi-weekly
(circle one),

_____ alimony in the amount of \$ _____ per: month / week / bi-weekly (circle
one).

2. A copy of the Final Judgment or Order for Support is attached to this Motion.

3. The Final Judgment/Order for Support required the () Petitioner () Respondent to pay:

_____ the Oblige, directly.

_____ Other: _____.

4. The Petitioner and Respondent are requesting an IWO for the following reason: _____

Dated: _____

Dated: _____

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

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

STATE OF FLORIDA
COUNTY OF _____
Sworn to or affirmed and signed before me on _____ by _____.

STATE OF FLORIDA
COUNTY OF _____
Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC—STATE OF FLORIDA

NOTARY PUBLIC—STATE OF FLORIDA

[Print, type, or stamp commissioned name of notary.]
____ Personally known
____ Produced identification
Type of identification produced _____

[Print, type, or stamp commissioned name of notary.]
____ Personally known
____ Produced identification
Type of identification produced _____

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

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

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA
FAMILY LAW DIVISION

_____,
Petitioner
and

CASE NO.: _____

DIVISION: _____

_____,
Respondent

MOTION FOR INCOME WITHHOLDING ORDER (IWO)

COMES NOW the _____ Petitioner _____ Respondent, requesting entry of an Income Withholding Order (IWO) in the above referenced case.

1. A () Final Judgment () Order for Support (check one) was entered in this case on _____ (date) and ordered: (check all that apply)

____ child support in the amount of \$_____ per: month / week / bi-weekly (circle one),

____ alimony in the amount of \$_____ per: month / week / bi-weekly (circle one).

2. A copy of the Final Judgment or Order for Support is attached to this Motion.

3. The Final Judgment/Order for Support required the () Petitioner () Respondent to pay:

____ the Obligee, directly.

____ Other: _____.

4. The () Petitioner () Respondent is requesting an IWO for the following reason: _____

I HEREBY CERTIFY that a copy of this Motion has been furnished by [check one only] () mail () faxed and mailed () hand delivered to the person(s) listed below on _____ [date].

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Signature of Moving Party

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Fax: _____

Dated: _____

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.

INCOME WITHHOLDING FOR SUPPORT - Instructions

The Income Withholding for Support (IWO) is the OMB-approved form used for income withholding in tribal, intrastate, and interstate cases as well as all child support orders initially issued in the state on or after January 1, 1994, and all child support orders initially issued (or modified) in the state before January 1, 1994 if arrearages occur. This form is the standard format prescribed by the Secretary in accordance with 42 USC §666(b)(6)(A)(ii). Except as noted, the following information is required and must be included.

Please note:

- For the purpose of this IWO form and these instructions, “state” is defined as a state or territory.
- Do’s and don’ts on using this form are found at www.acf.hhs.gov/programs/css/resource/using-the-income-withholding-for-support-form-dos-and-donts.

COMPLETED BY SENDER:

- 1a. **Original Income Withholding Order/Notice for Support (IWO).** Check the box if this is an initial or original IWO.
- 1b. **Amended IWO.** Check the box to indicate that this form amends a previous IWO. Any changes to an IWO must be done through an amended IWO.
- 1c. **One-Time Order/Notice For Lump Sum Payment.** Check the box when this IWO is to attach a one-time collection of a lump sum payment. When this box is checked, enter the amount in field 14, Lump Sum Payment, in the *Amounts to Withhold* section. Additional IWOs must be issued to collect subsequent lump sum payments.
- 1d. **Termination of IWO.** Check the box to stop income withholding on a child support order. Complete all applicable identifying information to aid the employer/income withholder in terminating the correct IWO.
- 1e. **Date.** Date this form is completed and/or signed.
- 1f. **Child Support Enforcement (CSE) Agency, Court, Attorney, Private Individual/Entity (Check One).** Check the appropriate box to indicate which entity is sending the IWO. If this IWO is **not** completed by a state or tribal CSE agency, the sender should contact the CSE agency (see www.acf.hhs.gov/programs/css/resource/state-income-withholding-contacts-and-program-information) to determine if the CSE agency needs a copy of this form to facilitate payment processing.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

This IWO must be regular on its face. The IWO must be rejected and returned to sender under the following circumstances:

- IWO instructs the employer/income withholder to send a payment to an entity other than a state disbursement unit (for example, payable to the custodial party, court, or attorney). Each state is required to operate a state disbursement unit (SDU), which is a centralized facility for collection and disbursement of child support payments. Exception: If this IWO is issued by a court, attorney, or private individual/entity and the initial child support order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, the employer/income withholder must follow the payment instructions on the form.
- Form does not contain all information necessary for the employer to comply with the withholding.
- Form is altered or contains invalid information.
- Amount to withhold is not a dollar amount.
- Sender has not used the OMB-approved form for the IWO.
- A copy of the underlying order is required and not included.

If you receive this document from an attorney or private individual/entity, a copy of the underlying order containing a provision authorizing income withholding must be attached.

COMPLETED BY SENDER:

- 1g. **State/Tribe/Territory.** Name of state or tribe sending this form. This must be a governmental entity of the state or a tribal organization authorized by a tribal government to operate a CSE program. If you are a tribe submitting this form on behalf of another tribe, complete line 1i.
- 1h. **Remittance ID (include w/payment).** Identifier that employers must include when sending payments for this IWO. The Remittance ID is entered as the case identifier on the electronic funds transfer/electronic data interchange (EFT/EDI) record.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

The employer/income withholder must use the Remittance ID when remitting payments so the SDU or tribe can identify and apply the payment correctly. The Remittance ID is entered as the case identifier on the EFT/EDI record.

COMPLETED BY SENDER:

- 1i. **City/County/Dist./Tribe.** Name of the city, county, or district sending this form. This must be a government entity of the state or the name of the tribe authorized by a tribal government to operate a CSE program for which this form is being sent. (A tribe should leave this field blank unless submitting this form on behalf of another tribe.)
- 1j. **Order ID.** Unique identifier associated with a specific child support obligation. It could be a court case number, docket number, or other identifier designated by the sender.
- 1k. **Private Individual/Entity.** Name of the private individual/entity or non-IV-D tribal CSE organization sending this form.
- 1l. **CSE Agency Case ID.** Unique identifier assigned to a state or tribal CSE case. In a state IV-D case as defined at 45 Code of Federal Regulations (CFR) 305.1, this is the identifier reported to the Federal Case Registry (FCR). One IWO must be issued for each IV-D case and must use the unique CSE Agency Case ID. For tribes, this would be either the FCR identifier or other applicable identifier.

Fields 2 and 3 refer to the employee/obligor's employer/income withholder and specific case information.

- 2a. **Employer/Income Withholder's Name.** Name of employer or income withholder.
- 2b. **Employer/Income Withholder's Address.** Employer/income withholder's mailing address including street/PO box, city, state, and zip code. (This may differ from the employee/obligor's work site.) If the employer/income withholder is a federal government agency, the IWO should be sent to the address listed under Federal Agency Income Withholding Contacts and Program Information at www.acf.hhs.gov/programs/css/resource/federal-agency-income-withholding-contact-information.
- 2c. **Employer/Income Withholder's FEIN.** Employer/income withholder's nine-digit Federal Employer Identification Number (if available).
- 3a. **Employee/Obligor's Name.** Employee/obligor's last name, first name, middle name.
- 3b. **Employee/Obligor's Social Security Number.** Employee/obligor's Social Security number or

other taxpayer identification number.

- 3c. **Custodial Party/Obligee's Name.** Custodial party/obligee's last name, first name, middle name. Enter one custodial party/obligee's name on each IWO form. Multiple custodial parties/obligees are not to be entered on a single IWO. Issue one IWO per state IV-D case as defined at 45 CFR 305.1
- 3d. **Child(ren)'s Name(s).** Child(ren)'s last name(s), first name(s), middle name(s). (Note: If there are more than six children for this IWO, list additional children's names and birth dates in field 33 - Supplemental Information). Enter the child(ren) associated with the custodial party/obligee and employee/obligor only. Child(ren) of multiple custodial parties/obligees is not to be entered on an IWO.
- 3e. **Child(ren)'s Birth Date(s).** Date of birth for each child named.
- 3f. **Blank box.** Space for court stamps, bar codes, or other information.

ORDER INFORMATION – Field 4 identifies which state or tribe issued the order. Fields 5 through 12 identify the dollar amount to withhold for a specific kind of support (taken directly from the support order) for a specific time period.

4. **State/Tribe.** Name of the state or tribe that issued the order.
- 5a-b. **Current Child Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.
- 6a-b. **Past-due Child Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.
- 6c. **Arrears Greater Than 12 Weeks?** The appropriate box (Yes/No) must be checked indicating whether arrears are greater than 12 weeks so the employer/income withholder can determine the withholding limit.
- 7a-b. **Current Cash Medical Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.
- 8a-b. **Past-due Cash Medical Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.
- 9a-b. **Current Spousal Support.** (Alimony) Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.
- 10a-b. **Past-due Spousal Support.** (Alimony) Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.
- 11a-c. **Other.** Miscellaneous obligations dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order. **Must specify** a description of the obligation (for example, court fees).
- 12a-b. **Total Amount to Withhold.** The total amount of the deductions **per** the corresponding time period. Fields 5a, 6a, 7a, 8a, 9a, 10a, and 11a should total the amount in 12a.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

An acceptable method of determining the amount to be paid on a weekly or biweekly basis is to multiply the monthly amount due by 12 and divide that result by the number of pay periods in a year.

AMOUNTS TO WITHHOLD - Fields 13a through 13d specify the dollar amount to be withheld for this IWO if the employer/income withholder's pay cycle does not correspond with field 12b.

- 13a. **Per Weekly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid weekly.
- 13b. **Per Semimonthly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid twice a month.
- 13c. **Per Biweekly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid every two weeks.
- 13d. **Per Monthly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid once a month.
- 14. **Lump Sum Payment.** Dollar amount withheld when the IWO is used to attach a lump sum payment. This field should be used when field 1c is checked.

REMITTANCE INFORMATION - Payments are forwarded to the SDU in each state, unless the order was issued by a tribal CSE agency. If the order was issued by a tribal CSE agency, the employer/income withholder must follow the remittance instructions on the form.

- 15. **State/Tribe.** Name of the state or tribe sending this document.
- 16. **Days.** Number of days after the effective date noted in field 17 in which withholding must begin according to the state or tribal laws/procedures for the employee/obligor's principal place of employment.
- 17. **Date.** Effective date of this IWO.
- 18. **Working Days.** Number of working days within which an employer/income withholder must remit amounts withheld pursuant to the state or tribal laws/procedures of the principal place of employment.
- 19. **% of Disposable Income.** The percentage of disposable income that may be withheld from the employee/obligor's paycheck.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

For state orders, the employer/income withholder may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (15 USC §1673(b)); or 2) the amounts allowed by the state of the employee/obligor's principal place of employment.

For tribal orders, the employer/income withholder may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers/income withholders who receive a state order, the employer/income withholder may not withhold more than the limit set by the law of the jurisdiction in which the employer/income withholder is located or the maximum amount permitted under section 303 (b) of the Federal Consumer Credit Protection Act (15 USC §1673(b)).

A federal government agency may withhold from a variety of incomes and forms of payment, including voluntary separation incentive payments (buy-out payments), incentive pay, and cash awards. For a more complete list, see 5 CFR 581.103.

COMPLETED BY SENDER:

20. **State/Tribe.** Name of the state or tribe sending this document.
21. **Document Tracking ID.** Optional unique identifier for this form assigned by the sender.

Please Note: Employer's Name, FEIN, Employee/Obligor's Name and SSN, Remittance ID, CSE Agency Case ID, and Order ID must appear in the header on pages two and subsequent pages.

22. **FIPS Code.** Federal Information Processing Standards code.
23. **SDU/Tribal Order Payee.** Name of SDU (or payee specified in the underlying tribal support order) to which payments must be sent. Federal law requires payments made by IWO to be sent to the SDU except for payments in which the initial child support order was entered before January 1, 1994 or payments in tribal CSE orders.
24. **SDU/Tribal Payee Address.** Address of the SDU (or payee specified in the underlying tribal support order) to which payments must be sent. Federal law requires payments made by IWO to be sent to the SDU except for payments in which the initial child support order was entered before January 1, 1994 or payments in tribal CSE orders.

COMPLETED BY EMPLOYER/INCOME WITHHOLDER:

25. **Return to Sender Checkbox.** The employer/income withholder should check this box and return the IWO to the sender if this IWO is not payable to an SDU or tribal payee or this IWO is not regular on its face. Federal law requires payments made by IWO to be sent to the SDU except for payments in which the initial child support order was entered before January 1, 1994 or payments in tribal CSE orders.

COMPLETED BY SENDER:

26. **Signature of Judge/Issuing Official.** Signature (if required by state or tribal law) of the official authorizing this IWO.
27. **Print Name of Judge/Issuing Official.** Name of the official authorizing this IWO.
28. **Title of Judge/Issuing Official.** Title of the official authorizing this IWO.
29. **Date of Signature.** Optional date the judge/issuing official signs this IWO.
30. **Copy of IWO checkbox.** Check this box for all intergovernmental IWOs. If checked, the employer/income withholder is required to provide a copy of the IWO to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

The following fields refer to federal, state, or tribal laws that apply to issuing an IWO to an employer/income withholder. State- or tribal-specific information may be included only in the fields below.

COMPLETED BY SENDER:

31. **Liability.** Additional information on the penalty and/or citation of the penalty for an employer/income withholder who fails to comply with the IWO. The state or tribal law/procedures of the employee/obligor's principal place of employment govern the penalty.
32. **Anti-discrimination.** Additional information on the penalty and/or citation of the penalty for an employer/income withholder who discharges, refuses to employ, or disciplines an

employee/obligor as a result of the IWO. The state or tribal law/procedures of the employee/obligor's principal place of employment govern the penalty.

33. **Supplemental Information.** Any state-specific information needed, such as maximum withholding percentage for non-employees, fees the employer/income withholder may charge the obligor for income withholding, or children's names and DOBs if there are more than six children on this IWO. Additional information must be consistent with the requirements of the form and the instructions.

COMPLETED BY EMPLOYER/INCOME WITHHOLDER:

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS

The employer must complete this section when the employee/obligor's employment is terminated, income withholding ceases, or if the employee/obligor has never worked for the employer.

- 34a-b. **Employment/Income Status Checkbox.** Check the employment/income status of the employee/obligor.
35. **Termination Date.** If applicable, date employee/obligor was terminated.
36. **Last Known Phone Number.** Last known (home/cell/other) phone number of the employee/obligor.
37. **Last Known Address.** Last known home/ mailing address of the employee/obligor.
38. **Final Payment Date.** Date employer sent final payment to SDU/tribal payee.
39. **Final Payment Amount.** Amount of final payment sent to SDU/tribal payee.
40. **New Employer's Name.** Name of employee's/obligor's new employer (if known).
41. **New Employer's Address.** Address of employee's/obligor's new employer (if known).

COMPLETED BY SENDER:

CONTACT INFORMATION

42. **Issuer Name (Employer/Income Withholder Contact).** Name of the contact person that the employer/income withholder can call for information regarding this IWO.
43. **Issuer Phone Number.** Phone number of the contact person.
44. **Issuer Fax Number.** Fax number of the contact person.
45. **Issuer E-mail/Website.** E-mail or website of the contact person.
46. **Termination/Income Status and Correspondence Address.** Address to which the employer should return the Employment Termination or Income Status notice. It is also the address that the employer should use to correspond with the issuing entity.
47. **Issuer Name (Employee/Obligor Contact).** Name of the contact person that the employee/obligor can call for information.
48. **Issuer Phone Number.** Phone number of the contact person.

49. **Issuer Fax Number.** Fax number of the contact person.
50. **Issuer E-mail/Website.** E-mail or website of the contact person.

The Paperwork Reduction Act of 1995

This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average 5 minutes per response for Non-IV-D CPs; 2 minutes per response for employers; 3 seconds for e-IWO employers, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.996(d), FLORIDA ADDENDUM TO INCOME WITHHOLDING ORDER (07/13)

When should this form be used?

This form should be used when the court has ordered that support be paid by income deduction and OMB Form 0970-0154, Income Withholding for Support, has been used. This form must be added to the OMB form to provide provisions required for income deduction orders by Florida law.

This form should be typed or printed in black ink. It should be attached to the OMB form and **filed** with the clerk of the circuit court in the county in which your action is pending.

What should I do next?

A copy of this form and a copy of the OMB Income Withholding for Support form, signed by the judge, should be sent to the **obligor's** payor by certified mail, return receipt requested. The return receipt should be sent to the person who prepared this form, so that it can be filed with the court with Florida Family Law Rules of Procedure Form 12.996(c), **Notice of Filing Return Receipt**.

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 61.13 and 61.1301, Florida Statutes.

Special Instructions...

When filling out an Income Withholding for Support form, please note the following additional instructions for that form:

1. The Remittance Identifier is the County Code for the county the case was heard in followed by the Case Number. A list of county codes is included with these instructions.
2. The FIPS code may be found on the attached list. Use the code for the County in which the case is pending.

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.

FIPS and County Codes

<u>COUNTY</u>	<u>FIPS</u>	<u>COUNTY CODE</u>	<u>COUNTY</u>	<u>FIPS</u>	<u>COUNTY CODE</u>
ALACHUA	12001	01	LAKE	12069	35
BAKER	12003	02	LEE	12071	36
BAY	12005	03	LEON	12073	37
BRADFORD	12007	04	LEVY	12075	38
BREVARD	12009	05	LIBERTY	12077	39
BROWARD	12011	06	MADISON	12079	40
CALHOUN	12013	07	MANATEE	12081	41
CHARLOTTE	12015	08	MARION	12083	42
CITRUS	12017	09	MARTIN	12085	43
CLAY	12019	10	MONROE	12087	44
COLLIER	12021	11	NASSAU	12089	45
COLUMBIA	12023	12	OKALOOSA	12091	46
DADE	12025	13	OKEECHOBEE	12093	47
DESOTO	12027	14	ORANGE	12095	48
DIXIE	12029	15	OSCEOLA	12097	49
DUVAL	12031	16	PALM BEACH	12099	50
ESCAMBIA	12033	17	PASCO	12101	51
FLAGLER	12035	18	PINELLAS	12103	52
FRANKLIN	12037	19	POLK	12105	53
GADSDEN	12039	20	PUTNAM	12107	54
GILCHRIST	12041	21	ST. JOHNS	12109	55
GLADES	12043	22	ST. LUCIE	12111	56
GULF	12045	23	SANTA ROSA	12113	57
HAMILTON	12047	24	SARASOTA	12115	58
HARDEE	12049	25	SEMINOLE	12117	59
HENDRY	12051	26	SUMTER	12119	60
HERNANDO	12053	27	SUWANNEE	12121	61
HIGHLANDS	12055	28	TAYLOR	12123	62
HILLSBOROUGH	12057	29	UNION	12125	63
HOLMES	12059	30	VOLUSIA	12127	64
INDIAN RIVER	12061	31	WAKULLA	12129	65
JACKSON	12063	32	WALTON	12131	66
JEFFERSON	12065	33	WASHINGTON	12133	67
LAFAYETTE	12067	34			

Instructions for Florida Family Law Rules of Procedure Form 12.996(d), Florida Addendum to Income Withholding Order (07/13)

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

Case No: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent.

FLORIDA ADDENDUM TO INCOME WITHHOLDING ORDER

THE PAYOR, {name} _____, **IS HEREBY NOTIFIED** that, under sections 61.13 and 61.1301, Florida Statutes, you have the responsibilities and rights set forth below with regard to the Income Withholding Order/Notice for Support.

1. The Income Withholding Order/Notice for Support is enforceable against employers specifically listed upon the form as well as **all subsequent employers/payors** of Obligor, {name} _____, {address} _____.
2. You are required to deduct from the obligor's income the amount specified in the income withholding 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 in excess of the amount allowed under section 303(b) of the Consumer Credit Protection Act, 15 U.S.C. Section 1673(b), as amended.
3. You must implement the 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 withholding order 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.
4. 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 withholding order, 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.
5. 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.

6. You may collect up to \$5 against the obligor's income to reimburse you for the administrative costs for the first income deduction and up to \$2 for each deduction thereafter.
7. The Income Withholding Order/Notice for Support is binding on you until further notice by court order or until you no longer provide income to the obligor.
8. When you no longer provide income to the obligor, you shall notify the obligee, *{name}* _____, *{address}* _____, and provide the obligor's last known address and the name and address of the obligor's new payor, if known, utilizing the form contained within the Income Withholding Order/Notice for Support. 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.
9. 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.
10. 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.
11. 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.
12. 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.
13. 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 and clicking on "Payments." Payment options include Expert Pay, Automated Clearing House (ACH) credit through your financial institution, www.myfloridacounty.com, or Western Union. Payors may contact the SDU Customer Service Employer telephone line at 1-888-883-0743.

14. The amount of arrears owed, if any, is \$_____. You must withhold an additional twenty percent (20%) or more of the ongoing periodic obligation towards same at the rate of \$_____ per _____ until full payment is made of any arrearage, attorneys' fees and costs—provided that no deduction shall be applied to attorneys' fees and costs until the full amount of any arrearage is paid. If a delinquency accrues after the order establishing, modifying, or enforcing support has been entered and there is no existing order for repayment of the delinquency or a pre-existing arrearage, a payor shall deduct \$_____ per _____ (which represents an additional twenty percent (20%) of the current support obligation, or other amount agreed to by the parties) until the delinquency and any attorneys' fees and costs are paid in full. No deduction may be applied to attorneys' fees and costs until the delinquency is paid in full.

15. Pursuant to sections 61.13 and 61.1301, Florida Statutes, the amounts listed for payment on the Income Withholding Order must be varied by the employer/payor for bonus income, or similar one-time payment:

You shall deduct [*Choose only one*] () the full amount, () _____%, or () none of the income which is payable to the obligor in the form of a bonus or other similar one-time payment, up to the amount of arrearage reported in the Income Deduction Order or the remaining balance thereof, and forward the payment to the State of Florida Disbursement Unit. For purposes of this subparagraph, "bonus" means a payment in addition to an obligor's usual compensation and which is in addition to any amounts contracted for or otherwise legally due and shall not include any commission payments due an obligor.

16. Child Support Reduction/Termination Schedule. Child support amount listed on the IWO shall be automatically reduced or terminated as set forth in the following schedule:

Please list children by initials from eldest to youngest		Insert in this column the day, month, and year the child support obligation terminates for each designated child (see instructions)		Insert in this column the amount of child support for all minor children remaining (including designated child).
Child 1 (Eldest) Initials & year of birth:	<i>From the effective date of this Income Deduction Order until the following date:</i>		<i>child support for Child 1 and all other younger child(ren) should be paid in the following monthly amount:</i>	
Child 2	<i>After the date set</i>		<i>child support for Child 2 and</i>	

Initials & year of birth:	<i>forth in the row above until the following date:</i>		<i>all other younger child(ren) should be paid in the following monthly amount:</i>	
Child 3 Initials & year of birth:	<i>After the date set forth in the row above until the following date:</i>		<i>child support for Child 3 and all other younger child(ren) should be paid in the following monthly amount:</i>	
Child 4 Initials & year of birth:	<i>After the date set forth in the row above until the following date:</i>		<i>child support for Child 4 and all other younger child(ren) should be paid in the following monthly amount:</i>	
Child 5 Initials & year of birth:	<i>After the date set forth in the row above until the following date:</i>		<i>child support for Child 5 and all other younger child(ren) should be paid in the following monthly amount:</i>	

(Continue on additional pages for additional children)

NOTE: This change only relates to the amount of the child support obligation portion of the payments listed in the first page of the Income Withholding Order. If there is a child support arrearage in a Title IV-D case, the amount will not be reduced due to the child no longer being eligible for support pursuant to paragraph 11 above.

17. Additional information regarding the implementation of income deduction may be found at www.floridasdu.com.

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}* _____.

INCOME WITHHOLDING FOR SUPPORT

- ORIGINAL INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)
- AMENDED IWO
- ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT
- TERMINATION OF IWO

Date: _____

Child Support Enforcement (CSE) Agency Court Attorney Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions www.acf.hhs.gov/programs/css/resource/income-withholding-for-support-instructions). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying order must be attached.

State/Tribe/Territory _____ Remittance ID (include w/payment) _____
 City/County/Dist./Tribe _____ Order ID _____
 Private Individual/Entity _____ CSE Agency Case ID _____

Employer/Income Withholder's Name _____ Employer/Income Withholder's Address _____ _____ Employer/Income Withholder's FEIN _____ Child(ren)'s Name(s) (Last, First, Middle) _____ _____ _____ _____ _____	RE: _____ Employee/Obligor's Name (Last, First, Middle) _____ Employee/Obligor's Social Security Number _____ Custodial Party/Obligee's Name (Last, First, Middle) _____ <div style="border: 1px solid black; width: 100%; height: 100%; margin-top: 20px;"></div>
Child(ren)'s Birth Date(s) _____ _____ _____ _____ _____	

ORDER INFORMATION: This document is based on the support or withholding order from _____ (State/Tribe). You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$ _____ Per _____ current child support
 \$ _____ Per _____ past-due child support - **Arrears greater than 12 weeks?** Yes No
 \$ _____ Per _____ current cash medical support
 \$ _____ Per _____ past-due cash medical support
 \$ _____ Per _____ current spousal support
 \$ _____ Per _____ past-due spousal support
 \$ _____ Per _____ other (must specify) _____

for a **Total Amount to Withhold** of \$ _____ per _____

AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ _____ per weekly pay period \$ _____ per semimonthly pay period (twice a month)
 \$ _____ per biweekly pay period (every two weeks) \$ _____ per monthly pay period
 \$ _____ **Lump Sum Payment:** Do not stop any existing IWO unless you receive a termination order.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
CSE Agency Case Identifier: _____ Order Identifier: _____

REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is _____ (State/Tribe), you must begin withholding no later than the first pay period that occurs _____ days after the date of _____. Send payment within _____ working days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold up to _____ % of disposable income. If the obligor is a non-employee, obtain withholding limits from Supplemental Information on page 3. If the employee/obligor's principal place of employment is not _____ (State/Tribe), obtain withholding limitations, time requirements, and any allowable employer fees at www.acf.hhs.gov/programs/css/resource/state-income-withholding-contacts-and-program-information for the employee/obligor's principal place of employment.

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit (SDU)), see www.acf.hhs.gov/programs/css/employers/electronic-payments.

Include the **Remittance ID with the payment** and if necessary this FIPS code: _____.

Remit payment to _____ (SDU/Tribal Order Payee)
at _____ (SDU/Tribal Payee Address)

Return to Sender [Completed by Employer/Income Withholder]. Payment must be directed to an SDU in accordance with 42 USC §666(b)(5) and (b)(6) or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

Signature of Judge/Issuing Official (if Required by State or Tribal Law): _____
Print Name of Judge/Issuing Official: _____
Title of Judge/Issuing Official: _____
Date of Signature: _____

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at www.acf.hhs.gov/programs/css/resource/state-income-withholding-contacts-and-program-information.

Priority: Withholding for support has priority over any other legal process under State law against the same income (42 USC §666(b)(7)). If a federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments To SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a court, attorney, or private individual/entity and the initial order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the state (or tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the state or tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

OMB Expiration Date - 7/31/2017. The OMB Expiration Date has no bearing on the termination date of the IWO; it identifies the version of the form currently in use.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
CSE Agency Case Identifier: _____ Order Identifier: _____

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) (15 USC §1673(b)); or 2) the amounts allowed by the state of the employee/obligor's principal place of employment or tribal law if a tribal order (see *Remittance Information*). Disposable income is the net income after mandatory deductions such as: state, federal, local taxes; Social Security taxes; statutory pension contributions; and Medicare taxes. The federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% --to 55% and 65% --if the arrears are greater than 12 weeks. If permitted by the state or tribe, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers/income withholders who receive a state IWO, you may not withhold more than the limit set by tribal law.

Depending upon applicable state or tribal law, you may need to consider amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Arrears greater than 12 weeks? If the *Order Information* does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

Supplemental Information:

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

Employer's Name: _____ Employer FEIN: _____

Employee/Obligor's Name: _____ SSN: _____

CSE Agency Case Identifier: _____ Order Identifier: _____

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the contact information below:

This person has never worked for this employer nor received periodic income.

This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known phone number: _____

Last known address: _____

Final payment date to SDU/tribal payee: _____ Final payment amount: _____

New employer's name: _____

New employer's address: _____

CONTACT INFORMATION:

To Employer/Income Withholder: If you have questions, contact _____ (issuer name)

by phone: _____, by fax: _____, by e-mail or website: _____

Send termination/income status notice and other correspondence to: _____ (issuer address).

To Employee/Obligor: If the employee/obligor has questions, contact _____ (issuer name)

by phone: _____, by fax: _____, by e-mail or website: _____

The Paperwork Reduction Act of 1995

This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average 5 minutes per response for Non-IV-D CPs; 2 minutes per response for employers; 3 seconds for e-IWO employers, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

ATTACHMENT A

STYLE OF SUIT

Petitioner

Respondent

CASE NUMBER _____

DIVISION _____

PERIODIC AMOUNTS OBLIGOR ORDERED TO PAY:

CURRENT:		ARREARAGE:	TOTAL ARREARS DUE	PERIODIC PAYMENT AMOUNT
CHILD SUPPORT	\$ _____	CHILD SUPPORT	\$ _____	\$ _____
ALIMONY	\$ _____	ALIMONY	\$ _____	\$ _____
OTHER*	\$ _____	OTHER*	\$ _____	\$ _____

***INSTRUCTIONS:** Include SDU fee of 4% per payment not to exceed \$5.25

PAYMENT FREQUENCY - CHECK ONE: (WILL APPLY TO ALL PAYMENTS)

_____ **WEEKLY**

_____ **BI-WEEKLY** (Every two weeks/26 per year)

_____ **SEMI-MONTHLY** (Twice monthly/24 per year) - **DATES:** on _____ and _____

_____ **MONTHLY** on _____

PAYMENT INFORMATION - CHECK ONE:

_____ **PAYABLE THROUGH THE COURT - FIRST PAYMENT DATE (MUST BE GIVEN)** _____

_____ **NOT PAYABLE THROUGH THE COURT AT THIS TIME.**

PAYMENTS TO BE SENT TO:

STATE OF FLORIDA DISBURSEMENT UNIT (SDU)
P.O. BOX 8500
TALLAHASSEE, FLORIDA 32314-8500

******THE FOLLOWING INFORMATION MUST BE COMPLETED******

OBLIGEE

OBLIGOR

Social Security Number: _____

Social Security Number: _____

Name: _____

Name: _____

Address: _____

Address: _____

Cty/St/Zip _____

Cty/St/Zip _____

DOB: _____ **Phone #** _____

DOB: _____ **Phone #** _____

Employer: _____

Address: _____

Cty/St/Zip _____

FULL NAME(S) OF CHILD(REN):

_____ **SS#** _____ **DOB** _____

_____ **SS#** _____ **DOB** _____

_____ **SS#** _____ **DOB** _____

PREPARED BY: _____ **PHONE NUMBER:** _____

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 THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH 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 section 303(b) of the Consumer Credit Protection Act, 15 U.S.C. §1673(b) as amended.
 2. You must implement the 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, the 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
- Florida Family Law Rules of Procedure Form 12.996(b), Notice to Payor (09/12)

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 and clicking on "Payments." Payment options include Expert Pay, Automated Clearing House (ACH) credit through your financial institution, www.myfloridasdu.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.

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): _____

 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 (3/10)

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 be mailed or hand delivered to the other party or his or her attorney.

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 THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

Case No: _____

Division: _____

_____,
Petitioner,

And

_____,
Respondent.

NOTICE OF FILING RETURN RECEIPT

{Name} _____, the [Choose 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 [Choose only one] () Petitioner's () Respondent's employer.

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: _____

Signature of Party or his/her attorney

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.

ATTACHMENT A (Payment Information Sheet)

STYLE OF SUIT _____

CASE NUMBER _____

Petitioner

DIVISION _____

Respondent

PERIODIC AMOUNTS OBLIGOR ORDERED TO PAY:

<u>CURRENT:</u>	<u>ARREARAGE:</u>	<u>TOTAL</u>	<u>PERIODIC</u>
	<u>ARREARS DUE</u>	<u>PAYMENT AMOUNT</u>	
CHILD SUPPORT \$ _____	CHILD SUPPORT \$ _____	\$ _____	\$ _____
ALIMONY \$ _____	ALIMONY \$ _____	\$ _____	\$ _____
OTHER* \$ _____	OTHER* \$ _____	\$ _____	\$ _____

***INSTRUCTIONS:** _____

PAYMENT FREQUENCY – CHECK ONE: (WILL APPLY TO ALL PAYMENTS)

_____ **WEEKLY** _____ **BI-WEEKLY** (Every two weeks/26 per year)
 _____ **SEMI-MONTHLY** (Twice monthly/24 per year) – **DATES:** on _____ and _____

PAYMENT INFORMATION – CHECK ONE:

_____ **PAYABLE THROUGH THE COURT – FIRST PAYMENT DATE (MUST BE GIVEN)** _____
 _____ **NOT PAYABLE THROUGH THE COURT AT THIS TIME.**

PAYMENTS TO BE SENT TO:

STATE OF FLORIDA DISBURSEMENT UNIT (SDU)
 P.O. BOX 8500
 TALLAHASSEE, FLORIDA 32314-8500

******THE FOLLOWING INFORMATION MUST BE COMPLETED******

OBLIGEE	OBLIGOR
Social Security Number: _____	Social Security Number: _____
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Cty/St/Zip _____	Cty/St/Zip _____
DOB: _____ Phone # _____	DOB: _____ Phone # _____
	Employer: _____
	Address: _____
	Cty/St/Zip: _____

FULL NAME(S) OF CHILD(REN):

_____	SS# _____	DOB _____
_____	SS# _____	DOB _____
_____	SS# _____	DOB _____

PREPARED BY: _____ PHONE NUMBER: _____

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORMS
12.920(a), MOTION FOR REFERRAL TO GENERAL MAGISTRATE,
12.920(b), ORDER OF REFERRAL TO GENERAL MAGISTRATE, and
12.920(c), NOTICE OF HEARING BEFORE GENERAL MAGISTRATE

When should these forms be used?

A **general magistrate** is an attorney appointed by a **judge** to take testimony and recommend decisions on certain matters connected with a divorce. These recommendations are then reviewed by the judge and are generally approved unless contrary to the law or the facts of the case. The primary purposes of having general magistrates hear family law matters are to reduce the costs of litigation and to speed up cases. Either **party** may request that their case, or portions of their case, be heard by a general magistrate by filing **Motion for Referral to General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(a). You must also prepare an **Order of Referral to General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(b), to submit to the judge assigned to your case.

Many times, the court, either on its own motion or under current administrative orders of the court, may refer your case to a general magistrate. Even in those instances, you may be required to prepare and submit an **Order of Referral to General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(b), to the judge.

Once a general magistrate has been appointed to your case, the general magistrate will assign a time and place for a **hearing** as soon as reasonably possible after the referral is made. The general magistrate will give notice of that hearing to each of the parties directly or will direct a party or attorney in the case to file and serve a notice of hearing on the other party. If you are asked to send the notice of hearing, you will need to use the form entitled **Notice of Hearing Before General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(c). Regardless of who prepares the notice of hearing, the moving party (the one who requested referral to the general magistrate) is required to have the notice properly served on the other party.

These forms 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?

If you are filing a **Motion for Referral to General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(a), you need to send or deliver your motion directly to the judge assigned to your case, along with an **Order of Referral to General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(b), and an addressed, stamped envelope for each party in the case. The judge will then either grant or deny the motion, usually without a hearing.

If you are required to submit a **Order of Referral to General Magistrate**,  Florida Family Law Rules of Procedure Form 12.920(b), to the judge assigned to your case, you will need to send or deliver the order directly to the judge, along with addressed, stamped envelopes for each party in the case.

The party who prepares any of these forms must file the original with the clerk of the circuit court. A copy of the motion must be mailed **or** hand delivered to any 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. For further information, see rule 12.490, Florida Family Law Rules of Procedure.

Special notes...

IMPORTANT: After the judge refers your case to a general magistrate, either party (including the party who was required to prepare and submit the Order of Referral) may object to the referral within 10 days of the date that the referral is made (if the Order of Referral is served by mail, the parties have an additional 5 days within which to object to the referral). Every litigant is entitled to have his or her case heard by a judge. However, before you decide to object to an Order of Referral to General Magistrate, you should consider the potential extra costs and time delays that may result from having a judge hear your case instead of a general magistrate. You may want to speak with an attorney in your area who can assist you in making a more informed decision regarding whether you should file an objection to an Order of Referral to General Magistrate.

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 THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner,

and

Respondent.

MOTION FOR REFERRAL TO GENERAL MAGISTRATE

I, *{full legal name}* _____, request that the Court enter an order referring this case to a general magistrate. The case should be referred to a general magistrate on the following issues: *{identify the relevant pleadings}* _

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.

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA
FAMILY LAW DIVISION

Petitioner,
and

Respondent.

Case No.: _____

Division: _____

ORDER OF REFERRAL TO GENERAL MAGISTRATE

IT IS ORDERED that this case is referred to General Magistrate _____
(phone: _____), for further proceedings on the issues raised in the following pleadings:

The General Magistrate is authorized to administer oaths and conduct hearings, which may include taking of evidence, and shall file a report and recommendations that contains findings of fact, conclusions of law, and the name of the court reporter, if any.

Florida Family Law Rule of Procedure 12.490(b)(4) provides that any party or the general magistrate may set the action for hearing. PLEASE NOTE that in the Thirteenth Judicial Circuit, the general magistrate will set a hearing only after being requested to do so by one or both parties. The request may be made by phone at the number provided above.

A REFERRAL TO A GENERAL MAGISTRATE REQUIRES THE CONSENT OF ALL PARTIES. YOU ARE ENTITLED TO HAVE THIS MATTER HEARD BY A JUDGE. IF YOU DO NOT WANT TO HAVE THIS MATTER HEARD BY THE GENERAL MAGISTRATE, YOU MUST FILE A WRITTEN OBJECTION TO THE REFERRAL WITHIN TEN DAYS AFTER SERVICE OF THIS ORDER. IF THE TIME SET FOR THE HEARING IS LESS THAN TEN DAYS AFTER THE SERVICE OF THIS ORDER, THE OBJECTION MUST BE MADE BEFORE THE HEARING. IF THIS ORDER IS SERVED WITHIN THE FIRST TWENTY DAYS AFTER SERVICE OF PROCESS, THE TIME TO FILE AN OBJECTION IS EXTENDED TO THE TIME WITHIN WHICH A RESPONSIVE PLEADING IS DUE. FAILURE TO FILE A WRITTEN OBJECTION WITHIN THE APPLICABLE TIME PERIOD IS DEEMED TO BE A CONSENT TO THE REFERRAL. REVIEW OF THE REPORT AND RECOMMENDATIONS MADE BY THE GENERAL MAGISTRATE SHALL BE BY EXCEPTIONS AS PROVIDED IN FLORIDA FAMILY LAW RULE OF PROCEDURE RULE 12.490(f). A RECORD, WHICH INCLUDES A TRANSCRIPT OF PROCEEDINGS, MAY BE REQUIRED TO SUPPORT EXCEPTIONS.

If either party files a timely objection, this matter shall be returned to the undersigned judge, and the objecting party must schedule a hearing or case management conference before the judge within ten days of filing the objection.

SHOULD YOU WISH TO SEEK REVIEW OF THE REPORT AND RECOMMENDATIONS MADE BY THE GENERAL MAGISTRATE, YOU MUST FILE EXCEPTIONS IN ACCORDANCE WITH FLORIDA FAMILY LAW RULE OF PROCEDURE 12.490(f). YOU WILL BE REQUIRED TO PROVIDE THE COURT WITH A RECORD SUFFICIENT TO SUPPORT YOUR EXCEPTIONS, OR YOUR EXCEPTIONS WILL BE DENIED. A RECORD ORDINARILY INCLUDES A WRITTEN TRANSCRIPT OF ALL RELEVANT PROCEEDINGS. THE PERSON SEEKING REVIEW MUST HAVE THE TRANSCRIPT PREPARED IF NECESSARY FOR THE COURT'S REVIEW.

You are advised that in the Thirteenth Judicial Circuit, electronic recording is provided by the Court. A party may provide a court reporter at his or her own expense.

PLEASE NOTE: Any case or part thereof constituting a CHILD SUPPORT ENFORCEMENT issue proceeds pursuant to current Administrative Orders of the Court, as well as Florida Family Law Rule of Procedure 12.491 (Child Support Enforcement) and 12.615 (Civil Contempt in Support Matters), if applicable. The language above in bold capital letters does not apply to child support enforcement issues.

DONE AND ORDERED on _____, _____.

CIRCUIT COURT JUDGE

COPIES TO:

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 the ADA Coordinator, Hillsborough County Courthouse, 800 E. Twiggs St., Room 604, Tampa, Florida 33602, (813) 272-7040, 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.

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,

and

Respondent.

NOTICE OF HEARING BEFORE GENERAL MAGISTRATE

[✎ fill in **all** blanks]

TO: _____

There will be a hearing before General Magistrate _____,
on {date} _____, at {time} _____ m., in Room _____ of the George
Edgecomb Courthouse, 800 East Twiggs Street, Tampa, Florida 33602, on the following issues: _____

_____ hour(s)/ _____ minutes have been reserved for this hearing.

PLEASE GOVERN YOURSELF ACCORDINGLY.

If the matter before the General Magistrate is a Motion for Civil Contempt/Enforcement, FAILURE TO APPEAR AT THE HEARING MAY RESULT IN THE COURT ISSUING A WRIT OF BODILY ATTACHMENT FOR YOUR ARREST. IF YOU ARE ARRESTED, YOU MAY BE HELD IN JAIL UP TO 48 HOURS BEFORE A HEARING IS HELD.

PLEASE GOVERN YOURSELF ACCORDINGLY.

This part to be filled out by the court or filled in with information you have obtained from the court:

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 the ADA Coordinator, Hillsborough County Courthouse, 800 E. Twiggs St., Room 604, Tampa, Florida 33602, (813) 272-7040, 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.

SHOULD YOU WISH TO SEEK REVIEW OF THE REPORT AND RECOMMENDATION MADE BY THE GENERAL MAGISTRATE, YOU MUST FILE EXCEPTIONS IN ACCORDANCE WITH RULE 12.490(f), FLORIDA FAMILY LAW RULES OF PROCEDURE. YOU WILL BE REQUIRED TO PROVIDE THE COURT WITH A RECORD SUFFICIENT TO SUPPORT YOUR EXCEPTIONS, OR YOUR EXCEPTIONS WILL BE DENIED. A RECORD ORDINARILY INCLUDES A WRITTEN TRANSCRIPT OF ALL RELEVANT PROCEEDINGS. THE PERSON SEEKING REVIEW MUST HAVE THE TRANSCRIPT PREPARED IF NECESSARY FOR THE COURT'S REVIEW.

YOU ARE HEREBY ADVISED THAT IN THIS CIRCUIT:

- a. electronic recording is provided by the court. A party may provide a court reporter at that party's expense.
- b. a court reporter is provided by the court.

If you are represented by an attorney or plan to retain an attorney for this matter you should notify the attorney of this hearing.

If this matter is resolved, the moving party shall contact the General Magistrate's Office to cancel this hearing.

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.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.923, NOTICE OF HEARING (GENERAL) (9/11)

When should this form be used?

Anytime you have set a hearing before a **judge**, you must send notice of the **hearing** to the other party. **IMPORTANT:** If your hearing has been set before a general magistrate, you should use **Notice of Hearing Before General Magistrate**, Florida Family Law Rules of Procedure Form 12.920(c). If your hearing has been set before a child support enforcement hearing officer, you should use **Notice of Hearing (Child Support Hearing Officer)**, Florida Supreme Court Approved Family Law Form 12.921.

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 a **default** has been entered, you must still send this form to the other party to notify the other party of the **final hearing**.

Where can I look for more information?

Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms. For further information on serving notices of hearing, see rule 1.090(d), Florida Civil Rules of Procedure.

Special notes...

To set a hearing date and time, you will usually have to make a good-faith effort to coordinate a mutually convenient date and time for you, the other parties in the case, and the judge, except in certain emergency situations. Some circuits may have additional procedural requirements that you must follow when you notify the court and other parties of your scheduled hearing. Therefore, before you complete this form, you should contact the clerk's office, **family law intake staff**, or **judicial assistant** for information regarding the proper procedure to follow.

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 THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

Case No.: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent.

NOTICE OF HEARING (GENERAL)#

[fill in **all** blanks]

TO: {name of other party}: _____

There will be a hearing before Judge {name} _____,

on {date} _____, at {time} _____ m., in Room _____ of the _____

Courthouse, on the following issues: _____

_____.

_____ hour(s)/_____ minutes have been reserved for this hearing.

This part is to be filled out by the court or to be filled in with information you obtained from the court:

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 the ADA Coordinator, Hillsborough County Courthouse, 800 E. Twiggs St., Room 604, Tampa, Florida 33602, (813) 272-7040, 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.

If you are represented by an attorney or plan to retain an attorney for this matter, you should notify the attorney of this hearing.

If this matter is resolved, the moving party shall contact the judge's office to cancel this hearing.

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: _____

Email Address: _____

Dated: _____

Signature of Party

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

Email 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, whose address is {street} _____,

{city} _____ (state) _____, {phone} _____,

helped {name} _____,

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

Fee Schedule For Family Law Cases

(These fees are effective June 1, 2009)

Clerk fees (payable to The Clerk of the Circuit Court):

Type	Fee	Statute Reference
Adoption *	\$442.00	63.102 & 28.241(1)(a)
Termination of Parental Rights *	\$442.00	63.087 & 28.241(1)(a)
Delayed Birth Certificate *	\$442.00	682.0195 & 28.241(1)(a)
Disabilities of nonage; removed (Emancipation) *	\$400.00	743.015 & 28.241(1)(a)
Temporary Custody by Extended Family Member *	\$400.00	751.03 & 28.241(1)(a)
Name Change *	\$414.00	68.07 & 28.241(1)(a)
Counter Petition <i>for case indicated with</i> *	\$395.00	28.101 & 28.241(1)(c)
Dissolution of Marriage **	\$408.00	28.241 & 28.101
All other Family Law actions not listed above **	\$300.00	28.241(1)(a)
Counter Petition <i>for case indicated with</i> **	\$295.00	28.101 & 28.241(1)(c)
Sealing Fee	\$42.00	28.24(25)
Attorney appearing Pro Hac Vice	\$100.00	28.241(6)
Notice of Appeal <i>(Requires 2 separate checks: (1) \$300.00 made payable to the <u>Second District Court of Appeals</u>; (2) \$100.00 +\$1.00 per page of entire Notice of Appeal and \$2.00 for certifying made payable to Clerk of the Circuit Court)</i>	\$300.00 (Second DCA) \$100.00 plus copy and certification fee (Clerk)	28.241(2); 28.24(3); 28.24(5)(a); 35.22
Reopen fee	\$50.00	28.241(1)(b)
Writ of Garnishment issued	\$188.00	28.241(1)(a)
Issuing a Summons (Initial, Alias, and Pluries)	\$10.00	28.241(1)(d)
Issue & filing a subpoena	\$7.00	28.241(18)(a)
Signing and sealing a subpoena	\$2.00	28.24(18)(b)
Copies	\$1.00 (per page)	28.24(5)(a)
Certification	\$2.00	28.24(3)
Notary fee	\$10.00 (each)	117.05(2)(a)
Approving Bond	\$8.50	28.24(19)
Administering oath	\$3.50	38.25(13)
Exemplified certificate	\$7.00	28.24(16)
Clerk Certificate	\$7.00	28.24(8)
<i>Child Support Fees</i>		
Judgment payoff statement (Child Support)	\$25.00	61.14(6)(f)1
Payment History (Child Support, Alimony)	\$1.00 - \$2.00 per year	28.24(5)(a)
Affidavit of Delinquency	\$7.00	28.24(8)
Notice of Delinquency fee	\$25.00	61.14(6)(b)1.b.
Driver License/Non Payment of Child Support	\$25.00	61.14(6)(f)1.
Verification form	\$7.00	28.24(8)

Mediation (payable to The Clerk of the Circuit Court)

Family income greater than \$50,000 but less than \$100,000 per year	\$120.00	44.108(2)(b)
Family income less than \$50,000 per year	\$60.00	44.108(2)(b)

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW
FORM 12.915,
DESIGNATION OF CURRENT MAILING AND EMAIL ADDRESS (09/12)**

When should this form be used?

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

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

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

What should I do next?

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where your case is filed and keep a copy for your records. A copy of this form must be served on any other party in your case. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

Where can I look for more information?

Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms. The words that are in **bold underline** in these instructions are defined there.

Special notes...

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

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner,

and

Respondent.

DESIGNATION OF CURRENT MAILING AND E-MAIL ADDRESS

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): _____

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

I certify that a copy of this document was [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 _____

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}* _____.

IN THE _____ COURT, 13TH
JUDICIAL CIRCUIT, IN AND FOR
HILLSBOROUGH COUNTY, FLORIDA

CASE NO.: _____

Plaintiff/Petitioner,

v.

Defendant/Respondent.

_____/

NOTICE OF CONFIDENTIAL INFORMATION WITHIN COURT FILING

Pursuant to Florida Rule of Judicial Administration 2.420(d)(2), I hereby certify:

() (1) I am filing herewith a document containing confidential information as described in Rule 2.420(d)(1)(B) and that:

(a) The title/type of document is _____, and:

(b) () the entire document is confidential, or

() the confidential information within the document is precisely located at:

_____.

OR

() (2) A document was previously filed in this case that contains confidential information as described in Rule 2.420(d)(1)(B), but a Notice of Confidential Information within Court Filing was not filed with the document and the confidential information was not maintained as confidential by the clerk of the court. I hereby notify the clerk that this confidential information is located as follows:

(a) Title/type of document: _____;

(b) Date of filing (if known): _____;

(c) Date of document: _____;

(d) Docket entry number: _____;

(e) () Entire document is confidential, or

() Precise location of confidential information in document: _____

_____.

Filer's Signature

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing was furnished by _____ on: _____

_____ on _____, 20____.

Name
Address
Phone
Florida Bar No. (if applicable)
E-mail address

Note: The clerk of court shall review filings identified as containing confidential information to determine whether the information is facially subject to confidentiality under subdivision (d)(1)(B). The clerk shall notify the filer in writing within 5 days if the clerk determines that the information is NOT subject to confidentiality, and the records shall not be held as confidential for more than 10 days, unless a motion is filed pursuant to subdivision (d)(3) of the Rule. Fla. R. Jud. Admin. 2.420(d)(2).