

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

PAYEE

CASE NUMBER: _____

vs

UCN NUMBER: _____

PAYOR

DIVISION: _____

Payor Name: _____

Date of Birth: _____

Social Security Number: _____

Driver's License: _____

State: _____

**REQUEST TO SUSPEND DRIVER'S LICENSE AND MOTOR VEHICLE
REGISTRATION**

I, _____ hereby request the depository to initiate driver's license suspension action against the above named Payor in accordance with the provisions of F.S.61.13016.

To the best of my knowledge, the Payor's current address is:

DATED this _____ day of _____, 20 _____.

Payee's Signature