

# **INSTRUCTIONS FOR FLORIDA FAMILY LAW FORM 12.983(c), ANSWER TO PETITION AND COUNTERPETITION TO DETERMINE PATERNITY AND FOR RELATED RELIEF (11/15)**

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

This form should be used when you are responding to a petition to determine paternity and asking the court for something different than what was in the petition, such as parental responsibility, time-sharing, and child support. The answer is used to admit or deny the allegations contained in the petition, and the counterpetition is used to ask for whatever you want the court to do for you. The other party has 20 days to answer your counterpetition after being served with your counterpetition.

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

## **IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

## **IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

## What should I do next?

You have 20 days to file an answer or answer and counterpetition to the other party's petition. A copy of this form, along with all of the other forms required with this answer and counterpetition, must be mailed **or** hand delivered to the other party in your case.

If you deny that the person named in the petition is the child(ren)'s father, a **Motion for Scientific Paternity Testing** Florida Supreme Court Approved Family Law Form 12.983(e), should be filed. This is used to ask the court to order a scientific test to determine who is the child(ren)'s father.

After you file an answer and counterpetition, the case will then generally proceed as follows:

**UNCONTESTED.** This case is uncontested if you and the other party agree on all issues raised in the petition and the counterpetition. If this is the case, **and** you and the other party have complied with **mandatory disclosure** and filed all of the required papers, either party may call the clerk, **family law intake staff**, or **judicial assistant** to set a final hearing. If you request the hearing, you must notify the other party of the hearing by using a **Notice of Hearing (General)**, Florida Supreme Court Approved Family Law Form 12.923, or other appropriate notice of hearing form.

**CONTESTED.** This case is contested if you and the other party disagree on any issues raised in the petition or counterpetition. If you are unable to settle the disputed issues, either party may file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, after you have complied with mandatory disclosure and filed all of the required papers. Some circuits may require the completion of **mediation** before a final hearing may be set. You should contact the clerk, family law intake staff, or judicial assistant for instructions on how to set your case for **trial (final hearing)**.

## Where can I look for more information?

**Before proceeding, you should read General Information for Self-Represented Litigants for some basic information.** The words that are in **bold underline** in these instructions are defined there. For further information, see chapter 742, Florida Statutes.

## Special notes...

If the child(ren)'s father signed papers at the hospital acknowledging that he was the father, paternity was established as a matter of law. This should be indicated on page 2, section 10a of the counterpetition part of this form. With this answer, you must file the following:

- **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d).
- **Notice of Social Security Number** Florida Supreme Court Approved Family Law Form 12.902(j).
- **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c). (This must be filed within 45 days of **service** of the petition on you if not filed with this answer.)
- **Certificate of Compliance with Mandatory Disclosure** Florida Family Law Rules of Procedure

Form 12.932. (This must be filed within 45 days of service of the petition on you, if not filed with this answer, unless you and the other party have agreed not to exchange these documents.)

- **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e). (If you do not know the other party's income, you may file this worksheet after his or her financial affidavit has been filed.)
- **Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(a), 12.995(b), or (c). If the parents have reached an agreement, a signed and notarized Parenting Plan should be attached. If the parents have not reached an agreement, a proposed Parenting Plan **may** be filed.

Many jurisdictions may require the completion of **mediation** before a final hearing may be set. A **parenting course** must be completed prior to entry of the final judgment. You should contact the office of your local clerk of court, family law intake staff, or the judicial assistant about requirements for parenting courses or mediation where you live.

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

The judge may request a **parenting plan recommendation** or appoint a **guardian ad litem** in your case. This means that a neutral person will review your situation and report to the judge concerning parenting issues. The purpose of such intervention is to be sure that the best interests of the child(ren) is being served. For more information, you may consult section 61.401 and 61.405, Florida Statutes.

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

**Shared Parental Responsibility**

**Sole Parental Responsibility**

**Supervised Time-Sharing**

**No contact**

**Parenting Plan**

**Parenting Plan Recommendations**

**Time-Sharing Schedule**

**Child Support.** The court may order one parent to pay child support to assist the other parent in meeting the child(ren)'s material needs. **Both parents are required to provide financial support**, but one parent may be ordered to pay a portion of his or her support for the child(ren) to the other parent.

Florida has adopted guidelines for determining the amount of child support to be paid. These guidelines are based on the combined income of **both** parents and take into account the financial contributions of both parents. You should file a **financial affidavit**, and the other parent will be required to do the same. From your financial affidavits, you should be able to calculate the amount of child support that should be

paid. Because the child support guidelines take several factors into consideration, change over time, and vary from state to state, your child support obligation may be more or less than that of other people in seemingly similar situations.

**Parenting Plan.** In all cases involving minor or dependent child(ren), a Parenting Plan shall be approved or established by the court. If the parties have reached an agreement, you should file a **Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(a), 12.995(b), or 12.995(c) which addresses the time-sharing schedule for the child(ren). If you have not reached an agreement, a proposed Parenting Plan **may** be filed. **A Parenting Plan will be established by the court.**

**Final Judgments.** These family law forms contain a **Final Judgment of Paternity**, Florida Supreme Court Approved Family Law Form 12.983(g), which the judge may use. You should check with the clerk, family law intake staff, or judicial assistant to see if you need to bring it with you to the hearing. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

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 \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

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

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

and

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

### **ANSWER TO PETITION AND COUNTERPETITION TO DETERMINE PATERNITY AND FOR RELATED RELIEF**

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

#### **ANSWER TO PETITION**

1. I **agree** with Petitioner as to the allegations raised in the following numbered paragraphs in the Petition and, therefore, **admit** those allegations: {indicate section and paragraph number}

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

2. I **disagree** with Petitioner as to the allegations raised in the following numbered paragraphs in the Petition and, therefore, **deny** those issues: {indicate section and paragraph number}

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

3. I currently am unable to admit or deny the following paragraphs due to lack of information:  
{indicate section and paragraph number} \_\_\_\_\_

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

#### **COUNTERPETITION TO DETERMINE PATERNITY AND FOR RELATED RELIEF**

##### **SECTION I. PATERNITY**

1. Respondent is the \_\_\_\_\_ mother \_\_\_\_\_ father of the following minor child(ren):

**Name**

**Birth Date**

- (1). \_\_\_\_\_  
(2). \_\_\_\_\_  
(3). \_\_\_\_\_  
(4). \_\_\_\_\_  
(5). \_\_\_\_\_

(6). \_\_\_\_\_

2. Petitioner's current address is: {street address, city, state}

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

3. Respondent's current address is: {street address, city, state}

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

4. Both parties are over the age of 18.

5. Petitioner {Choose only one} \_\_\_\_\_ is \_\_\_\_\_ is not a member of the military service.

Respondent {Choose only one} \_\_\_\_\_ is \_\_\_\_\_ is not a member of the military service.

6. Neither Petitioner nor Respondent is mentally incapacitated.

7. A completed Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit, Florida Supreme Court Approved Family Law Form 12.902(d), is filed with this counterpetition.

8. A completed Notice of Social Security Number, Florida Supreme Court Approved Family Law Form 12.902(j), is filed with this counterpetition.

9. A completed Family Law Financial Affidavit, Florida Family Law Rules of Procedure Form 12.902(b) or (c), \_\_\_\_\_ is, or \_\_\_\_\_ will be, filed.

**10. Paternity Facts.**

{Choose only one}

- a. \_\_\_\_\_ Paternity has previously been established as a matter of law.

- b. \_\_\_\_\_ The parties engaged in sexual intercourse with each other in the month(s) of {list month(s) and year(s)} \_\_\_\_\_,  
in: {city and state} \_\_\_\_\_.

As a result of the sexual intercourse, \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent conceived and gave birth to the minor child(ren) named in paragraph 1. \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent is the natural father of the minor child(ren). The mother \_\_\_\_\_ was \_\_\_\_\_ was not married at the time of the conception and/or birth of the minor child(ren) named in paragraph 1. If the mother was married, the name and address of her husband at the time of conception and/or birth is:

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

**SECTION II. PARENTING PLAN ESTABLISHING PARENTAL RESPONSIBILITY AND TIME-SHARING**

1. The minor child(ren) currently reside(s) with \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other: {explain}

\_\_\_\_\_.

2. **Parental Responsibility.** It is in the child(ren)'s best interests that parental responsibility be:  
{Choose only **one**}

a. \_\_\_\_\_ shared by both Father and Mother.

b. \_\_\_\_\_ awarded solely to \_\_\_\_\_ Father \_\_\_\_\_ Mother. Shared parental responsibility would be detrimental to the child(ren) because:

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3. **Parenting Plan and Time-Sharing.** It is in the best interests of the child(ren) that the family be ordered to comply with a Parenting Plan that \_\_\_\_\_ includes \_\_\_\_\_ does not include parental time-sharing with the child(ren). The Respondent states that it is in the best interests of the child(ren) that:

{Choose only **one**}

a. \_\_\_\_\_ The attached proposed Parenting Plan should be adopted by the court.  
The parties ( ) have ( ) have **not** agreed to the Parenting Plan.

b. b. The court should establish a Parenting Plan with the following provisions:

1. \_\_\_\_\_ **No** time-sharing for the \_\_\_\_\_ Father \_\_\_\_\_ Mother.

2. \_\_\_\_\_ Limited time-sharing with the \_\_\_\_\_ Father \_\_\_\_\_ Mother.

3. \_\_\_\_\_ Supervised time-sharing for the \_\_\_\_\_ Father \_\_\_\_\_ Mother.

4. \_\_\_\_\_ Supervised or third-party exchange for the child(ren).

Time-sharing schedule as follows:

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4. **Explain why this request is in the best interest of the child(ren):** \_\_\_\_\_

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5. The minor child(ren) should:

[Choose only **one**]

a. \_\_\_\_\_ retain his/her (their) present name(s).

b. \_\_\_\_\_ receive a change of name as follows:

present name(s)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

be changed to:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

### SECTION III. CHILD SUPPORT

*[Indicate **all** that apply]*

1. Respondent requests that the court award child support as determined by Florida's child support guidelines, section 61.30, Florida Statutes. A completed **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e), is, or will be, filed. Such support should be ordered retroactive to:

*[Choose only **one**]*

- a. \_\_\_\_\_ the date when the parents did not reside together in the same household with the child, not to exceed a period of 24 months before the date of filing of this counterpetition.
- b. \_\_\_\_\_ the date of the filing of this petition.
- c. \_\_\_\_\_ other: {date} \_\_\_\_\_ {Explain} \_\_\_\_\_.

2. \_\_\_\_\_ Respondent requests that the Court award a child support amount that is more than or less than Florida's child support guidelines. Respondent understands that a **Motion to Deviate from Child Support Guidelines**, Florida Supreme Court Approved Family Law Form 12.943, **must** be completed before the Court will consider this request.

3. \_\_\_\_\_ Respondent requests that medical/dental insurance coverage for the minor child(ren) be provided by:

*[Choose only **one**]*

- a. \_\_\_\_\_ Father.
- b. \_\_\_\_\_ Mother.

4. \_\_\_\_\_ Respondent requests that uninsured medical/dental expenses for the child(ren) be paid by: *[Choose only **one**]*

- a. \_\_\_\_\_ Father.
- b. \_\_\_\_\_ Mother.
- c. \_\_\_\_\_ Father and Mother each pay one-half.
- d. \_\_\_\_\_ Father and Mother each pay according to the percentages in the **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e).
- e. \_\_\_\_\_ Other {explain}: \_\_\_\_\_.

5. \_\_\_\_\_ Respondent requests that life insurance to secure child support be provided by:

*[Choose only **one**]*

- a. \_\_\_\_\_ Father.
- b. \_\_\_\_\_ Mother.
- c. \_\_\_\_\_ Both.

6. \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent \_\_\_\_\_ Both has (have) incurred medical expenses in the amount of \$ \_\_\_\_\_ on behalf of the minor child(ren), including hospital and other expenses incidental to the birth of the minor child(ren). There should be an appropriate allocation or apportionment of these expenses.



7. \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent \_\_\_\_\_ Both has (have) received past public assistance for this (these) minor child(ren).

### RESPONDENT'S REQUEST

1. Respondent requests a hearing on this petition and understands that he or she must attend the hearing.

2. Respondent requests that the Court enter an order that:

*[Choose **all** that apply]*

- a. \_\_\_\_\_ establishes paternity of the minor child(ren), ordering proper scientific testing, if necessary;
- b. \_\_\_\_\_ establishes a Parenting Plan containing provisions for parental responsibility and time-sharing for the minor or dependent child(ren);
- c. \_\_\_\_\_ awards child support, including medical/dental insurance coverage, for the minor child(ren);
- d. \_\_\_\_\_ determines the appropriate allocation or apportionment of all expenses incidental to the birth of the child(ren), including hospital and medical expenses;
- e. \_\_\_\_\_ determines the appropriate allocation or apportionment of all other past, present, and future medical and dental expenses incurred or to be incurred on behalf of the minor child(ren);
- f. \_\_\_\_\_ changes the child(ren)'s name(s); and
- g. \_\_\_\_\_ other relief as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ; and  
grants such other relief as may be appropriate and in the best interests of the minor child(ren).

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

### Petitioner or his/her attorney:

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

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

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

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

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

\_\_\_\_\_

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

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

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

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

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

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

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

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

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

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 Respondent/Counterpetitioner. This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{zip code}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_.

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.902(d)  
UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT  
(UCCJEA) AFFIDAVIT (11/15)**

**When should this form be used?**

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

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

**IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

**What should I do next?**

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

**IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please CAREFULLY read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and 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 sections 61.501-61.542, Florida Statutes.

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

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

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

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.

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

Respondent.

____/____			
____/____			
____/____			

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

**THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # \_\_\_\_\_:**

Child's Full Legal Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

**Child's Residence for the past 5 years:**

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

**THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # \_\_\_\_\_:**

Child's Full Legal Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

**Child's Residence for the past 5 years:**

[illegible]

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

*[Choose only **one**]*

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

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

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

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

[Choose only **one**]

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

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

- e. Name of each child: \_\_\_\_\_
- f. Type of proceeding: \_\_\_\_\_
- g. Court and state: \_\_\_\_\_
- h. Date of court order or judgment (if any): \_\_\_\_\_

**4. Persons not a party to this proceeding:**

[Choose only **one**]

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

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

a. Name and address of person: \_\_\_\_\_

\_\_\_\_ has physical custody \_\_\_\_ claims custody rights \_\_\_\_ claims visitation or time-sharing  
Name of each child: \_\_\_\_\_

b. Name and address of person: \_\_\_\_\_

\_\_\_\_ has physical custody \_\_\_\_ claims custody rights \_\_\_\_ claims visitation or time-sharing  
Name of each child: \_\_\_\_\_

c. Name and address of person: \_\_\_\_\_

\_\_\_\_ has physical custody \_\_\_\_ claims custody rights \_\_\_\_ claims visitation or time-sharing  
Name of each child: \_\_\_\_\_

**5. Knowledge of prior child support proceedings:**

[Choose only **one**]

\_\_\_\_ The child(ren) described in this affidavit are NOT subject to existing child support order(s) in this or any state or territory.



\_\_\_\_\_The child(ren) described in this affidavit are subject to the following existing child support order(s):

Name of each child: \_\_\_\_\_

Type of proceeding: \_\_\_\_\_

Court and address: \_\_\_\_\_

Date of court order/judgment (if any): \_\_\_\_\_

Amount of child support paid and by whom: \_\_\_\_\_

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

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

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

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

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

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

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

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

\_\_\_\_\_

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

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

Signature of \_\_\_\_\_ HUSBAND \_\_\_\_\_ WIFE

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

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

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

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

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

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

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 deputy clerk.}

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

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

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

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

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

This form was completed with the assistance of:

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

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

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

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

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.902(j),  
NOTICE OF SOCIAL SECURITY NUMBER (11/15)**

**When should this form be used?**

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

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

**IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

**What should I do next?**

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

**IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the

procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and 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 chapter 61, Florida Statutes.

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

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

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

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

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

and

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

### NOTICE OF SOCIAL SECURITY NUMBER

I, {full legal name} \_\_\_\_\_, certify that  
my social security number is \_\_\_\_\_, as required by the applicable section of  
the Florida Statutes. My date of birth is \_\_\_\_\_.

[Choose **one** only]

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

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

{Attach additional pages if necessary.}

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

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

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

Signature

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

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

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

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

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

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

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

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

Date: \_\_\_\_\_

NOTARY PUBLIC or DEPUTY CLERK

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

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

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

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

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

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

This form was completed with the assistance of:

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

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

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

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

# INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.995(a), PARENTING PLAN (11/15)

## When should this form be used?

A **Parenting Plan** is required in all cases involving **time-sharing** with minor child(ren), even when time-sharing is not in dispute. The Parenting Plan must be developed and agreed to by the parents and approved by the court. If the parties cannot agree to a Parenting Plan or if the parents agreed to a plan that is not approved by the court, a Parenting Plan will be established by the court with or without the use of parenting plan recommendations. This form or a similar form should be used in the development of a Parenting Plan. If the case involves **supervised time-sharing**, the **Supervised/Safety Focused Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(b) or a similar form should be used. If the case involves relocation, pursuant to Section 61.13001, Florida Statutes, then a **Relocation/Long Distance Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(c) or a similar form should be used.

This form should be typed or printed in black ink. Please either delete or strike-through terms or paragraphs that are inappropriate or inapplicable to your agreement. If an agreement has been reached, **both** parties must sign the Parenting Plan and have their signatures witnessed by a **notary public** or **deputy clerk**. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where the **petition** was filed and keep a copy for your records. You should then refer to the instructions for your petition, **answer**, or answer and **counterpetition** concerning the procedures for setting a hearing or **trial (final hearing)**. If the parents have not reached an agreement, a proposed Parenting Plan may be filed by either parent at the time of or any time prior to the final hearing. If an agreed Parenting Plan is not filed by the parties, the court shall establish a Plan.

## IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

## IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial**

**Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and 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 chapter 61, Florida Statutes, and the instructions for the petition and/or answer that were filed in this case.

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

At a minimum, the **Parenting Plan** must describe in adequate detail:

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

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



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

electronic media related to the litigation with the child(ren), and refraining from disparaging comments about the other parent to the child(ren); and

- The developmental stages and needs of the child(ren) and the demonstrated capacity and disposition of each parent to meet the child(ren)'s developmental needs.

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

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

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

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

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

\_\_\_\_\_  
Mother,  
and  
\_\_\_\_\_  
Father

## PARENTING PLAN

This parenting plan is: *{Choose only **one**}*

\_\_\_\_\_ A Parenting Plan submitted to the court with the agreement of the parties.

\_\_\_\_\_ A proposed Parenting Plan submitted by or on behalf of:

*{Parent's Name}* \_\_\_\_\_.

\_\_\_\_\_ A Parenting Plan established by the court.

This parenting plan is: *{Choose only **one**}*

\_\_\_\_\_ A final Parenting Plan established by the court.

\_\_\_\_\_ A temporary Parenting Plan established by the court.

\_\_\_\_\_ A modification of a prior final Parenting Plan or prior final order.

### I. PARENTS

#### Mother

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

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

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

E-Mail: \_\_\_\_\_

\_\_\_\_\_ Address Unknown: *{Please indicate here if mother's address is unknown}*

\_\_\_\_\_ Address Confidential: *{Please indicate here if mother's address and phone numbers are confidential pursuant to either a \_\_\_\_\_ Final Judgment for Protection Against Domestic Violence, or \_\_\_\_\_ other court order \_\_\_\_\_}.*

#### Father

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

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

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

E-Mail: \_\_\_\_\_

\_\_\_\_\_ Address Unknown: *{Please indicate here if father's address is unknown}*

\_\_\_\_\_ Address Confidential: {Please indicate here if father's address and phone numbers are confidential pursuant to either a \_\_\_\_\_ Final Judgment for Protection Against Domestic Violence or \_\_\_\_\_ other court order\_\_\_\_\_.

**II. CHILDREN:** This parenting plan is for the following child(ren) born to, or adopted by the parties:  
(add additional lines as needed)

Name	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____

**III. JURISDICTION**

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

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

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

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

**IV. PARENTAL RESPONSIBILITY AND DECISION MAKING**

**1. Parental Responsibility {Choose only one}**

\_\_\_\_\_ **Shared Parental Responsibility.**

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

**OR**

\_\_\_\_\_ **Shared Parental Responsibility with Decision Making Authority**

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

Education/Academic decisions	_____ Mother	_____ Father
Non-emergency health care	_____ Mother	_____ Father
Other: <i>{Specify}</i> _____	_____ Mother	_____ Father
_____	_____ Mother	_____ Father
_____	_____ Mother	_____ Father

**OR**

**\_\_\_\_\_ Sole Parental Responsibility:**

It is in the best interests of the child(ren) that the \_\_\_\_\_ Mother \_\_\_\_\_ Father shall have sole authority to make major decisions for the child(ren.) It is detrimental to the child(ren) to have shared parental responsibility.

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

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

**3. Extra-curricular Activities *{Indicate all that apply}***

- a. \_\_\_\_\_ Either parent may register the child(ren) and allow them to participate in the activity of the child(ren)'s choice.
- b. \_\_\_\_\_ The parents must mutually agree to all extra-curricular activities.
- c. \_\_\_\_\_ The parent with the minor child(ren) shall transport the minor child(ren) to and/or from all mutually agreed upon extra-curricular activities, providing all necessary uniforms and equipment within the parent's possession.
- d. \_\_\_\_\_ The costs of the extra-curricular activities shall be paid by:  
Mother \_\_\_\_\_%      Father \_\_\_\_\_%
- e. \_\_\_\_\_ The uniforms and equipment required for the extra-curricular activities shall be paid by: Mother \_\_\_\_\_%      Father \_\_\_\_\_%
- f. \_\_\_\_\_ Other: *{Specify}* \_\_\_\_\_  
\_\_\_\_\_.

**V. INFORMATION SHARING.** Unless otherwise indicated or ordered by the Court:

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

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

Both parents have equal rights to inspect and receive governmental agency and law enforcement records concerning the child(ren).

Both parents shall have equal and independent authority to confer with the child(ren)'s school, day care, health care providers, and other programs with regard to the child(ren)'s educational, emotional, and social progress.

Both parents shall be listed as "emergency contacts" for the child(ren).

Each parent has a continuing responsibility to provide a residential, mailing, and contact address and contact telephone number to the other parent. Each parent shall notify the other parent in writing within 24 hours of any changes. Each parent shall notify the court in writing within seven (7) days of any changes.

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

**VI. SCHEDULING**

**1. School Calendar**

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

The parents shall follow the school calendar of: *{Indicate all that apply}*

- a. \_\_\_\_\_ the oldest child
- b. \_\_\_\_\_ the youngest child
- c. \_\_\_\_\_ County
- d. \_\_\_\_\_ School

2. **Academic Break Definition**

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

3. **Schedule Changes** {Indicate all that apply}

a. \_\_\_\_\_ A parent making a request for a schedule change will make the request as soon as possible, but in any event, except in cases of emergency, no less than \_\_\_\_\_ before the change is to occur.

b. \_\_\_\_\_ A parent requesting a change of schedule shall be responsible for any additional child care, or transportation costs caused by the change.

c. \_\_\_\_\_ Other {Specify} \_\_\_\_\_.

**VII. TIME-SHARING SCHEDULE**

1. **Weekday and Weekend Schedule**

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

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

WEEKENDS: \_\_\_\_\_ Every \_\_\_\_\_ Every Other \_\_\_\_\_ Other {specify} \_\_\_\_\_

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

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

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

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

\_\_\_\_\_

\_\_\_\_\_.

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

WEEKENDS: \_\_\_\_\_ Every \_\_\_\_\_ Every Other \_\_\_\_\_ Other {specify} \_\_\_\_\_

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

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

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

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

\_\_\_\_\_

\_\_\_\_\_.

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

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

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

2. **Holiday Schedule** {Choose only **one**}

a. \_\_\_\_\_ No holiday time sharing shall apply. The regular time-sharing schedule set forth above shall apply.

b. \_\_\_\_\_ Holiday time-sharing shall be as the parties agree.

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

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

This holiday schedule may affect the regular Time-Sharing Schedule. Parents may wish to specify either or both of the following options:

d. \_\_\_\_\_ When the parents are using an alternating weekend plan and the holiday schedule would result in one parent having the child(ren) for three weekends in a row,



the parents will exchange the following weekend, so that each has two weekends in a row before the regular alternating weekend pattern resumes.

e. \_\_\_\_ If a parent has the child(ren) on a weekend immediately before or after an unspecified holiday or non-school day, they shall have the child(ren) for the holiday or non-school day.

**3. Winter Break {Choose only *one*}**

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

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

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

**d. \_\_\_\_ Specific Winter Holidays**

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

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

**4. Spring Break {Choose only *one*}**

a. \_\_\_\_ The parents shall follow the regular schedule.

b. \_\_\_\_ The parents shall alternate the entire Spring Break with the Mother having the child(ren) during the \_\_\_\_ odd-numbered years \_\_\_\_ even numbered years.

c. \_\_\_\_ The \_\_\_\_ Father \_\_\_\_ Mother shall have the child(ren) for the entire Spring Break every year.

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

e. \_\_\_\_ Other: {Specify} \_\_\_\_\_.

5. **Summer Break** {Choose only **one**}

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

6. **Number of Overnights:**

Based upon the time-sharing schedule, the Mother has a total of \_\_\_\_ overnights per year and the Father has a total of \_\_\_\_ overnights per year.

**Note: The two numbers must equal 365.**

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

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

1. **Transportation** {Choose only **one**}

- a. \_\_\_\_ The \_\_\_\_ Mother \_\_\_\_ Father shall provide all transportation.
- b. \_\_\_\_ The parent beginning their time-sharing shall provide transportation for the child(ren).
- c. \_\_\_\_ The parent ending their time-sharing shall provide transportation for the child(ren).
- d. \_\_\_\_ Other: {Specify} \_\_\_\_\_.

2. **Exchange**

Both parents shall have the child(ren) ready on time with sufficient clothing packed and ready at the agreed upon time of exchange. If a parent is more than \_\_\_\_\_S minutes late without contacting the other parent to make other arrangements, the parent with the child(ren) may proceed with other plans and activities.  
{Choose only one}:

a. \_\_\_\_\_ Exchanges shall be at Mother's and Father's homes unless both parents agree to a different meeting place.

b. \_\_\_\_\_ Exchanges shall occur at \_\_\_\_\_ unless both parties agree in advance to a different meeting place.

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

3. **Transportation Costs** {Choose only one}

a. \_\_\_\_\_ Transportation costs are included in the Child Support Worksheets and/or the Order for Child Support and should not be included here.

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

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

4. **Foreign and Out-Of-State Travel** {Indicate all that apply}

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

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

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

\_\_\_\_\_.

d. \_\_\_\_\_ Other \_\_\_\_\_.

#### IX. EDUCATION

1. **School designation.**

For purposes of school boundary determination and registration, the \_\_\_\_\_ Mother's \_\_\_\_\_ Father's address shall be designated.

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

\_\_\_\_\_.

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

#### X. DESIGNATION FOR OTHER LEGAL PURPOSES

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

#### XI. COMMUNICATION

1. **Between Parents**

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

The parents shall communicate with each other: *{Indicate all that apply}*

\_\_\_\_\_ in person

\_\_\_\_\_ by telephone

\_\_\_\_\_ by letter

\_\_\_\_\_ by e-mail

\_\_\_\_\_ Other: *{Specify}* \_\_\_\_\_.

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

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

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

*{Choose only one}*

- a. \_\_\_\_\_ Anytime
- b. \_\_\_\_\_ Every day during the hours of \_\_\_\_\_ to \_\_\_\_\_.
- c. \_\_\_\_\_ On the following days \_\_\_\_\_  
during the hours of \_\_\_\_\_ to \_\_\_\_\_.
- d. \_\_\_\_\_ Other: \_\_\_\_\_.

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

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**XII. CHILD CARE** *{Choose only one}*

- a. \_\_\_\_\_ Each parent may select appropriate child care providers
- b. \_\_\_\_\_ All child care providers must be agreed upon by both parents.
- c. \_\_\_\_\_ Each parent must offer the other parent the opportunity to care for the child(ren) before using a child care provider for any period exceeding \_\_\_\_\_ hours.
- d. \_\_\_\_\_ Other : *{Specify}* \_\_\_\_\_.

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

Temporary changes to this Parenting Plan may be made informally without a written document; however, if the parties dispute the change, the Parenting Plan shall remain in effect until further order of the court.

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

**XIV. RELOCATION**

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

**XV. DISPUTES OR CONFLICT RESOLUTION**

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

**XVI. OTHER PROVISIONS**

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**SIGNATURES OF PARENTS**

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

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

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

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 \_\_\_\_\_

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

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

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

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**}* (     ) Mother (     ) Father

This form was completed with the assistance of:

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

# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(b), FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM) (01/15)

## When should this form be used?

This form should be used when you are involved in a family law case which requires a financial affidavit and your individual gross income is **UNDER \$50,000 per year** unless:

- (1) You are filing a simplified dissolution of marriage under rule 12.105 and both parties have waived the filing of a financial affidavit;
- (2) You have no minor children, no support issues, and have filed a written settlement agreement disposing of all financial issues; or
- (3) The court lacks jurisdiction to determine any financial issues.

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

## What should I do next?

A copy of this form must be served on the other party in your case within 45 days of being served with the petition, if it is not served on him or her with your initial papers. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

## Where can I look for more information?

**Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms.** The words that are in **“bold underline”** in these instructions are defined there. For further information, see Florida Family Law Rule of Procedure 12.285.

## Special notes...

If you want to keep your address confidential because you are the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

The affidavit must be completed using **monthly** income and expense amounts. If you are paid or your bills are due on a schedule which is not monthly, you must convert those amounts. Hints are provided below for making these conversions.

Instructions to Florida Family Law Rules of Procedure Form 12.902(b), Family Law Financial Affidavit (Short Form) (01/15)



**Hourly** - If you are paid by the hour, you may convert your income to monthly as follows:

Hourly amount	x	Hours worked per week	=	Weekly amount
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	<b>Monthly Amount</b>

**Daily** - If you are paid by the day, you may convert your income to monthly as follows:

Daily amount	x	Days worked per week	=	Weekly amount
Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	<b>Monthly Amount</b>

**Weekly** - If you are paid by the week, you may convert your income to monthly as follows:

Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	<b>Monthly Amount</b>

**Bi-weekly** - If you are paid every two weeks, you may convert your income to monthly as follows:

Bi-weekly amount	x	26	=	Yearly amount
Yearly amount	÷	12 Months per year	=	<b>Monthly Amount</b>

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

Semi-monthly amount	x	2	=	<b>Monthly Amount</b>
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Expenses may be converted in the same manner.

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

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

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

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

and

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

## **FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM)**

(Under \$50,000 Individual Gross Annual Income)

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

My Occupation: \_\_\_\_\_ Employed by: \_\_\_\_\_

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

Pay rate: \$ \_\_\_\_\_ ( ) every week ( ) every other week ( ) twice a month ( ) monthly  
( ) other: \_\_\_\_\_

\_\_\_ Check here if unemployed and explain on a separate sheet your efforts to find employment.

### **SECTION I. PRESENT MONTHLY GROSS INCOME:**

**All amounts must be MONTHLY.** See the instructions with this form to figure out money amounts for anything that is NOT paid monthly. Attach more paper, if needed. Items included under "other" should be listed separately with separate dollar amounts.

1. \$ \_\_\_\_\_ Monthly gross salary or wages
2. \_\_\_\_\_ Monthly bonuses, commissions, allowances, overtime, tips, and similar payments
3. \_\_\_\_\_ Monthly business income from sources such as self-employment, partnerships, close corporations, and/or independent contracts (gross receipts minus ordinary and necessary expenses required to produce income) (Attach sheet itemizing such income and expenses.)
4. \_\_\_\_\_ Monthly disability benefits/SSI
5. \_\_\_\_\_ Monthly Workers' Compensation
6. \_\_\_\_\_ Monthly Unemployment Compensation
7. \_\_\_\_\_ Monthly pension, retirement, or annuity payments
8. \_\_\_\_\_ Monthly Social Security benefits
9. \_\_\_\_\_ Monthly alimony actually received (Add 9a and 9b)
  - 9a. From this case: \$ \_\_\_\_\_
  - 9b. From other case(s): \_\_\_\_\_
10. \_\_\_\_\_ Monthly interest and dividends
11. \_\_\_\_\_ Monthly rental income (gross receipts minus ordinary and necessary expenses)

- required to produce income) (Attach sheet itemizing such income and expense items.)
12. \_\_\_\_\_ Monthly income from royalties, trusts, or estates
13. \_\_\_\_\_ Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses
14. \_\_\_\_\_ Monthly gains derived from dealing in property (not including nonrecurring gains)
15. \_\_\_\_\_ Any other income of a recurring nature (list source) \_\_\_\_\_
16. \_\_\_\_\_
17. \$ \_\_\_\_\_ **TOTAL PRESENT MONTHLY GROSS INCOME** (Add lines 1–16)

**PRESENT MONTHLY DEDUCTIONS:**

18. \$ \_\_\_\_\_ Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities)
- a. Filing Status \_\_\_\_\_
- b. Number of dependents claimed \_\_\_\_\_
19. \_\_\_\_\_ Monthly FICA or self-employment taxes
20. \_\_\_\_\_ Monthly Medicare payments
21. \_\_\_\_\_ Monthly mandatory union dues
22. \_\_\_\_\_ Monthly mandatory retirement payments
23. \_\_\_\_\_ Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship
24. \_\_\_\_\_ Monthly court-ordered child support actually paid for children from another relationship
25. \_\_\_\_\_ Monthly court-ordered alimony actually paid (Add 25a and 25b)
- 25a. from this case: \$ \_\_\_\_\_
- 25b. from other case(s): \$ \_\_\_\_\_
26. \$ \_\_\_\_\_ **TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES**  
(Add lines 18 through 25).
27. \$ \_\_\_\_\_ **PRESENT NET MONTHLY INCOME** (Subtract line 26 from line 17)

## SECTION II. AVERAGE MONTHLY EXPENSES

**Proposed/Estimated Expenses.** If this is a dissolution of marriage case **and** your expenses as listed below do not reflect what you actually pay currently, you should write "estimate" next to each amount that is estimated.

### A. HOUSEHOLD:

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

### B. AUTOMOBILE

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

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

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

### D. INSURANCE

Medical/Dental (if not listed on  
lines 23 or 45) \$ \_\_\_\_\_  
Child(ren)'s medical/dental \$ \_\_\_\_\_  
Life \$ \_\_\_\_\_  
Other: \_\_\_\_\_ \$ \_\_\_\_\_

### E. OTHER EXPENSES NOT LISTED ABOVE

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

### F. PAYMENTS TO CREDITORS

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

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

**SUMMARY**

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

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

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

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

**SECTION III. ASSETS AND LIABILITIES**

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

**A. ASSETS:**

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any asset(s) which you are requesting the judge award to you.		Current Fair Market Value	Nonmarital (check correct column)	
			husband	wife
<input type="checkbox"/>	Cash (on hand)	\$		
<input type="checkbox"/>	Cash (in banks or credit unions)			
<input type="checkbox"/>	Stocks, Bonds, Notes			
<input type="checkbox"/>	Real estate: (Home)			
<input type="checkbox"/>	(Other)			
<input type="checkbox"/>	Automobiles			
<input type="checkbox"/>	Other personal property			
<input type="checkbox"/>	Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
<input type="checkbox"/>	Other			
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	Check here if additional pages are attached.			
<b>Total Assets</b> (add next column)		\$		

**B. LIABILITIES:**

DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any debt(s) for which you believe you should be responsible.		Current Amount Owed	Nonmarital (check correct column)	
			husband	wife
<input type="checkbox"/>	Mortgages on real estate: First mortgage on home	\$		
<input type="checkbox"/>	Second mortgage on home			
<input type="checkbox"/>	Other mortgages			
<input type="checkbox"/>				
<input type="checkbox"/>	Auto loans			
<input type="checkbox"/>				
<input type="checkbox"/>	Charge/credit card accounts			
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	Other			
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	____ Check here if additional pages are attached.			
<b>Total Debts</b> (add next column)		\$		

**C. CONTINGENT ASSETS AND LIABILITIES:**

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

Contingent Assets Check the line next to any contingent asset(s) which you are requesting the judge award to you.		Possible Value	Nonmarital (check correct column)	
			husband	wife
<input type="checkbox"/>		\$		
<input type="checkbox"/>				
<b>Total Contingent Assets</b>		\$		

Contingent Liabilities Check the line next to any contingent debt(s) for which you believe you should be responsible.		Possible Amount Owed	Nonmarital (check correct column)	
			husband	wife
<input type="checkbox"/>		\$		
<input type="checkbox"/>				
<b>Total Contingent Liabilities</b>		\$		

#### SECTION IV. CHILD SUPPORT GUIDELINES WORKSHEET

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

[Check **one** only]

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

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



# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.932, CERTIFICATE OF COMPLIANCE WITH MANDATORY DISCLOSURE (09/12)

## When should this form be used?

**Mandatory disclosure** requires each **party** in a **dissolution of marriage** case to provide the other party with certain financial information and documents. These documents must be served on the other party within 45 days of **service** of the petition for **dissolution of marriage** or supplemental petition for modification on the **respondent**. The mandatory disclosure rule applies to all original and **supplemental** dissolution of marriage cases, except simplified dissolution of marriage cases and cases where the respondent is served by **constructive service** and does not answer. You should use this form to notify the court and the other party that you have complied with the mandatory disclosure rule.

Each party must provide the other party with the documents listed in section 2 of this form if the relief being sought is permanent regardless of whether it is an initial or supplemental proceeding. **ONLY THE ORIGINAL OF THE COMPLETED FORM IS FILED WITH THE COURT. EXCEPT FOR THE FINANCIAL AFFIDAVIT AND CHILD SUPPORT GUIDELINES WORKSHEET, NO DOCUMENTS SHALL BE FILED IN THE COURT FILE WITHOUT A PRIOR COURT ORDER. THE DOCUMENTS LISTED ON THE FORM ARE TO BE GIVEN TO THE OTHER PARTY.** If your individual gross annual income is under \$50,000, you should complete the **Family Law Financial Affidavit (Short Form)**, Florida Family Law Rules of Procedure Form 12.902(b). If your individual gross annual income is \$50,000 or more, you should complete the **Family Law Financial Affidavit (Long Form)**, Florida Family Law Rules of Procedure Form 12.902(c).

In addition, there are separate mandatory disclosure requirements that apply to **temporary financial hearings**, which are listed in section 1 of this form. The party seeking temporary financial relief must serve these documents on the other party with the notice of temporary financial hearing. The responding party must serve the required documents on the party seeking temporary relief. Service by e-mail or mail shall be at least 7 days before the temporary financial relief hearing. Service by delivery shall be no later than 5:00 p.m., 2 business days before the hearing. Any documents that have already been served under the requirements for temporary or initial proceedings do not need to be reserved again in the same proceeding. If a supplemental petition is filed, seeking modification, then the mandatory disclosure requirements begin again.

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

## What should I do next?

After you have provided the other party all of the financial information and documents and have filed this form certifying that you have complied with this rule, you are under a continuing duty to promptly give the other party any information or documents that change your financial status or that make the information already provided inaccurate. You should not file with the clerk any of the documents listed in the certificate of compliance other than the financial affidavit and the child support guidelines worksheet. Refer to the instructions regarding the petition in your case to determine how you should proceed after filing this form.

## Where can I look for more information?

**Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms.** The words that are in **bold underline** in these instructions are defined there. For further information, see Florida Family Law Rule of Procedure 12.285.

## Special notes...

You may provide copies of required documents; however, the originals must be produced for inspection if the other party requests to see them.

Although the financial affidavits are based on individual gross income, either party may ask the other party to complete the **Family Law Financial Affidavit (Long Form)**, Florida Family Law Rules of Procedure Form 12.902(c), by serving the appropriate interrogatory form. (See **Standard Family Law Interrogatories**, Florida Family Law Rules of Procedure Form 12.930(b) (original proceedings) or (c) (modification proceedings)).

Any portion of the mandatory disclosure rule may be modified by order of the **judge** or agreement of the parties. Therefore, you and your **spouse** may agree that you will not require each other to produce the documents required under the mandatory disclosure rule. This exception does **not** apply to the **Financial Affidavit**, Family Law Rules of Procedure Form 12.902(b) or (c), which is required in all cases and cannot be waived.

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

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

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

and

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

## **CERTIFICATE OF COMPLIANCE WITH MANDATORY DISCLOSURE**

**ONLY THE ORIGINAL OF THIS COMPLETED FORM IS  
FILED WITH THE COURT. EXCEPT FOR THE FINANCIAL  
AFFIDAVIT AND CHILD SUPPORT GUIDELINES WORKSHEET,  
NO DOCUMENTS SHALL BE FILED IN THE COURT FILE  
WITHOUT A PRIOR COURT ORDER. THE DOCUMENTS  
LISTED BELOW ARE TO BE GIVEN TO THE OTHER PARTY.**

I, {full legal name} \_\_\_\_\_, certify that I have complied  
with the mandatory disclosure required by Florida Family Law Rule 12.285 as follows:

### **1. FOR TEMPORARY FINANCIAL RELIEF, ONLY:**

The date the following documents were served: \_\_\_\_\_.

[Check **all** that apply]

- a. \_\_\_\_\_ Financial Affidavit
  - ( ) Florida Family Law Rules of Procedure Form 12.902(b) (short form)
  - ( ) Florida Family Law Rules of Procedure Form 12.902(c) (long form)
- b. \_\_\_\_\_ All personal (1040) federal tax, gift tax, and intangible personal property tax  
returns for the preceding year; **or**
  - ( ) Transcript of tax return as provided by IRS form 4506-T; **or**
  - ( ) IRS forms W-2, 1099, and K-1 for the past year because the income tax return  
for the past year has not been prepared.
- c. \_\_\_\_\_ Pay stubs or other evidence of earned income for the 3 months before the service of the  
financial affidavit.

### **2. FOR INITIAL, SUPPLEMENTAL, AND PERMANENT FINANCIAL RELIEF:**

The date the following documents were served: \_\_\_\_\_.

[Check **all** that apply]

- a. \_\_\_\_\_ Financial Affidavit
  - ( ) Florida Family Law Rules of Procedure Form 12.902(b) (short form)

- ( ) Florida Family Law Rules of Procedure Form 12.902(c) (long form)
- b. \_\_\_\_ All personal (1040) federal and state income tax returns, gift tax returns, and intangible personal property tax returns for the preceding 3 years;  
( ) IRS forms W-2, 1099, and K-1 for the past year because the income tax return for the past year has not been prepared.
- c. \_\_\_\_ Pay stubs or other evidence of earned income for the 3 months before the service of the financial affidavit.
- d. \_\_\_\_ A statement identifying the source and amount of all income for the 3 months before the service of the financial affidavit, if not reflected on the pay stubs produced.
- e. \_\_\_\_ All loan applications and financial statements prepared for any purpose or used for any purpose within the 12 months preceding the service of the financial affidavit.
- f. \_\_\_\_ All deeds to real estate in which I presently own or owned an interest within the past 3 years. All promissory notes in which I presently own or owned an interest within the last 12 months. All present leases in which I own an interest.
- g. \_\_\_\_ All periodic statements for the last 3 months for all checking accounts and for the last year for all savings accounts, money market funds, certificates of deposit, etc.
- h. \_\_\_\_ All brokerage account statements for the last 12 months.
- i. \_\_\_\_ Most recent statement for any pension, profit sharing, deferred compensation, or retirement plan (for example, IRA, 401(k), 403(b), SEP, KEOGH, etc.) and summary plan description for any such plan in which I am a participant or alternate payee.
- j. \_\_\_\_ The declaration page, the last periodic statement, and the certificate for any group insurance for all life insurance policies insuring my life or the life of me or my spouse.
- k. \_\_\_\_ All health and dental insurance cards covering either me or my spouse and/or our dependent child(ren).
- l. \_\_\_\_ Corporate, partnership, and trust tax returns for the last 3 tax years, in which I have an ownership or interest greater than or equal to 30%.
- m. \_\_\_\_ All credit card and charge account statements and other records showing my (our) indebtedness as of the date of the filing of this action and for the prior 3 months. All promissory notes on which I presently owe or owned within the past year. All lease agreements I presently owe.
- n. \_\_\_\_ All premarital and marital agreements between the parties to this case.
- o. \_\_\_\_ If a modification proceeding, all written agreements entered into between the parties at any time since the order to be modified was entered.
- p. \_\_\_\_ All documents and tangible evidence relating to claims for an unequal distribution of marital property, enhancement or appreciation in nonmarital property, or nonmarital status of an asset or debt.
- q. \_\_\_\_ Any court order directing that I pay or receive spousal support (alimony) or child support.

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

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

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

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

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

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

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

I understand that I am swearing or affirming under oath to the accuracy of my compliance with the mandatory disclosure requirements of Florida Family Law Rule of Procedure 12.285 and that, unless otherwise indicated with specificity, this disclosure is complete. I further understand that the punishment for knowingly making a false statement or incomplete disclosure includes fines and/or imprisonment.

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

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

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

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

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

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

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

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

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

This form was completed with the assistance of:

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

## INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(e), CHILD SUPPORT GUIDELINES WORKSHEET (09/12)

### When should this form be used?

You should complete this worksheet if **child support** is being requested in your case. If you know the income of the other **party**, this worksheet should accompany your **financial affidavit**. If you do not know the other party's income, this form must be completed after the other party files his or her financial affidavit, and **serves** a copy on you.

This form should be typed or printed in black ink. You should file the original with the **clerk of the circuit court** in the county where your case is filed and keep a copy for your records.

### What should I do next?

A copy of this form must be served on the other party in your case. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

### Where can I look for more information?

**Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms.** The words that are in "**bold underline**" in these instructions are defined there. For further information, see section 61.30, Florida Statutes.

### Special notes...

If you want to keep your address confidential because you are the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

The chart below contains the guideline amounts that you should use when calculating child support. This amount is based on the number of children and the combined income of the parents, and it is divided between the parents in direct proportion to their income or earning capacity. From time to time, some of the amounts in the child support guidelines chart will change. Be sure you have the most recent version of the chart before using it.

Because the guidelines are based on monthly amounts, it may be necessary to convert some income and expense figures from other frequencies to monthly. You should do this as follows:

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

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

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

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

### CHILD SUPPORT GUIDELINES CHART

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

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



Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
2600.00	568	880	1101	1242	1354	1447
2650.00	578	896	1121	1265	1379	1473
2700.00	588	912	1141	1287	1403	1500
2750.00	597	927	1160	1308	1426	1524
2800.00	607	941	1178	1328	1448	1549
2850.00	616	956	1197	1349	1471	1573
2900.00	626	971	1215	1370	1494	1598
2950.00	635	986	1234	1391	1517	1622
3000.00	644	1001	1252	1412	1540	1647
3050.00	654	1016	1271	1433	1563	1671
3100.00	663	1031	1289	1453	1586	1695
3150.00	673	1045	1308	1474	1608	1720
3200.00	682	1060	1327	1495	1631	1744
3250.00	691	1075	1345	1516	1654	1769
3300.00	701	1090	1364	1537	1677	1793
3350.00	710	1105	1382	1558	1700	1818
3400.00	720	1120	1401	1579	1723	1842
3450.00	729	1135	1419	1599	1745	1867
3500.00	738	1149	1438	1620	1768	1891
3550.00	748	1164	1456	1641	1791	1915
3600.00	757	1179	1475	1662	1814	1940
3650.00	767	1194	1493	1683	1837	1964
3700.00	776	1208	1503	1702	1857	1987
3750.00	784	1221	1520	1721	1878	2009
3800.00	793	1234	1536	1740	1899	2031
3850.00	802	1248	1553	1759	1920	2053
3900.00	811	1261	1570	1778	1940	2075
3950.00	819	1275	1587	1797	1961	2097
4000.00	828	1288	1603	1816	1982	2119
4050.00	837	1302	1620	1835	2002	2141
4100.00	846	1315	1637	1854	2023	2163
4150.00	854	1329	1654	1873	2044	2185
4200.00	863	1342	1670	1892	2064	2207
4250.00	872	1355	1687	1911	2085	2229
4300.00	881	1369	1704	1930	2106	2251
4350.00	889	1382	1721	1949	2127	2273
4400.00	898	1396	1737	1968	2147	2295
4450.00	907	1409	1754	1987	2168	2317

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
4500.00	916	1423	1771	2006	2189	2339
4550.00	924	1436	1788	2024	2209	2361
4600.00	933	1450	1804	2043	2230	2384
4650.00	942	1463	1821	2062	2251	2406
4700.00	951	1477	1838	2081	2271	2428
4750.00	959	1490	1855	2100	2292	2450
4800.00	968	1503	1871	2119	2313	2472
4850.00	977	1517	1888	2138	2334	2494
4900.00	986	1530	1905	2157	2354	2516
4950.00	993	1542	1927	2174	2372	2535
5000.00	1000	1551	1939	2188	2387	2551
5050.00	1006	1561	1952	2202	2402	2567
5100.00	1013	1571	1964	2215	2417	2583
5150.00	1019	1580	1976	2229	2432	2599
5200.00	1025	1590	1988	2243	2447	2615
5250.00	1032	1599	2000	2256	2462	2631
5300.00	1038	1609	2012	2270	2477	2647
5350.00	1045	1619	2024	2283	2492	2663
5400.00	1051	1628	2037	2297	2507	2679
5450.00	1057	1638	2049	2311	2522	2695
5500.00	1064	1647	2061	2324	2537	2711
5550.00	1070	1657	2073	2338	2552	2727
5600.00	1077	1667	2085	2352	2567	2743
5650.00	1083	1676	2097	2365	2582	2759
5700.00	1089	1686	2109	2379	2597	2775
5750.00	1096	1695	2122	2393	2612	2791
5800.00	1102	1705	2134	2406	2627	2807
5850.00	1107	1713	2144	2418	2639	2820
5900.00	1111	1721	2155	2429	2651	2833
5950.00	1116	1729	2165	2440	2663	2847
6000.00	1121	1737	2175	2451	2676	2860
6050.00	1126	1746	2185	2462	2688	2874
6100.00	1131	1754	2196	2473	2700	2887
6150.00	1136	1762	2206	2484	2712	2900
6200.00	1141	1770	2216	2495	2724	2914
6250.00	1145	1778	2227	2506	2737	2927
6300.00	1150	1786	2237	2517	2749	2941
6350.00	1155	1795	2247	2529	2761	2954

Combined Monthly Available Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
6400.00	1160	1803	2258	2540	2773	2967
6450.00	1165	1811	2268	2551	2785	2981
6500.00	1170	1819	2278	2562	2798	2994
6550.00	1175	1827	2288	2573	2810	3008
6600.00	1179	1835	2299	2584	2822	3021
6650.00	1184	1843	2309	2595	2834	3034
6700.00	1189	1850	2317	2604	2845	3045
6750.00	1193	1856	2325	2613	2854	3055
6800.00	1196	1862	2332	2621	2863	3064
6850.00	1200	1868	2340	2630	2872	3074
6900.00	1204	1873	2347	2639	2882	3084
6950.00	1208	1879	2355	2647	2891	3094
7000.00	1212	1885	2362	2656	2900	3103
7050.00	1216	1891	2370	2664	2909	3113
7100.00	1220	1897	2378	2673	2919	3123
7150.00	1224	1903	2385	2681	2928	3133
7200.00	1228	1909	2393	2690	2937	3142
7250.00	1232	1915	2400	2698	2946	3152
7300.00	1235	1921	2408	2707	2956	3162
7350.00	1239	1927	2415	2716	2965	3172
7400.00	1243	1933	2423	2724	2974	3181
7450.00	1247	1939	2430	2733	2983	3191
7500.00	1251	1945	2438	2741	2993	3201
7550.00	1255	1951	2446	2750	3002	3211
7600.00	1259	1957	2453	2758	3011	3220
7650.00	1263	1963	2461	2767	3020	3230
7700.00	1267	1969	2468	2775	3030	3240
7750.00	1271	1975	2476	2784	3039	3250
7800.00	1274	1981	2483	2792	3048	3259
7850.00	1278	1987	2491	2801	3057	3269
7900.00	1282	1992	2498	2810	3067	3279
7950.00	1286	1998	2506	2818	3076	3289
8000.00	1290	2004	2513	2827	3085	3298
8050.00	1294	2010	2521	2835	3094	3308
8100.00	1298	2016	2529	2844	3104	3318
8150.00	1302	2022	2536	2852	3113	3328
8200.00	1306	2028	2544	2861	3122	3337
8250.00	1310	2034	2551	2869	3131	3347

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

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

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

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

and

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

## NOTICE OF FILING CHILD SUPPORT GUIDELINES WORKSHEET

PLEASE TAKE NOTICE, that {name} \_\_\_\_\_, is filing his/her

Child Support Guidelines Worksheet attached and labeled Exhibit 1.

## CERTIFICATE OF SERVICE

I certify that a copy of this Notice of Filing with the Child Support Guidelines Worksheet was  
[**check all used**]: ( ) e-mailed ( ) mailed ( ) faxed ( ) hand delivered to the person(s) listed  
below on {date} \_\_\_\_\_.

### Other party or his/her attorney:

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

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

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

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

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

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

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

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

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

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

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

Florida Bar Number: \_\_\_\_\_

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

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
<b>c.</b> Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs			
<b>d.</b> Total Monthly Child Care & Health Costs [Add lines 5a + 5b +5c].			
<b>6.</b> Additional Support Payments Multiply the number on line 5d by the percentage on line 3A to determine the Father's share. Enter answer on line 6A. Multiply the number on line 5d by the percentage on line 3B to determine the Mother's share. Enter answer on line 6B.			
<b>Statutory Adjustments/Credits</b>			
<b>7. a.</b> Monthly child care payments actually made			
<b>b.</b> Monthly health insurance payments actually made			
<b>c.</b> Other payments/credits actually made for any noncovered medical, dental and prescription medication expenses of the child(ren) not ordered to be separately paid on a percentage basis. (See section 61.30 (8), Florida Statutes)			
<b>8.</b> Total Support Payments actually made (Add 7a through 7c)			
<b>9. MINIMUM CHILD SUPPORT OBLIGATION FOR EACH PARENT</b> [Line 4 plus line 6; minus line 8]			
<b>Substantial Time-Sharing (GROSS UP METHOD) If each parent exercises time-sharing at least 20 percent of the overnights in the year (73 overnights in the year), complete Nos. 10 through 21</b>			
	A. FATHER	B. MOTHER	TOTAL
<b>10.</b> Basic Monthly Obligation x 150% [Multiply line 2 by 1.5]			

CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
<b>11.</b> Increased Basic Obligation for each parent. Multiply the number on line 10 by the percentage on line 3A to determine the Father's share. Enter answer on line 11A. Multiply the number on line 10 by the percentage on line 3B to determine the Mother's share. Enter answer on line 11B.			
<b>12.</b> Percentage of overnight stays with each parent. The child(ren) spend(s) _____ overnight stays with the Father each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12A. The child(ren) spend(s) _____ overnight stays with the Mother each year. Using the number on the above line, multiply it by 100 and divide by 365. Enter this number on line 12B.	%	%	
<b>13.</b> Parent's support multiplied by other Parent's percentage of overnights. [Multiply line 11A by line 12B. Enter this number in 13A. Multiply line 11B by line 12A. Enter this number in 13B.]			
<b>Additional Support — Health Insurance, Child Care &amp; Other</b>			
<b>14. a.</b> Total Monthly Child Care Costs [Child care costs should not exceed the level required to provide quality care from a licensed source. See section 61.30(7), Florida Statutes, for more information.]			
<b>b.</b> Total Monthly Child(ren)'s Health Insurance Cost [This is only amounts actually paid for health insurance on the child(ren).]			
<b>c.</b> Total Monthly Child(ren)'s Noncovered Medical, Dental and Prescription Medication Costs.			
<b>d.</b> Total Monthly Child Care & Health Costs [Add lines 14a + 14b + 14c.]			



CHILD SUPPORT GUIDELINES WORKSHEET			
	A. FATHER	B. MOTHER	TOTAL
<b>15. Additional Support Payments.</b> Multiply the number on line 14d by the percentage on line 3A to determine the Father's share. Enter answer on line 15A. Multiply the number on line 14d by the percentage on line 3B to determine the Mother's share. Enter answer on line 15B.			
<b>Statutory Adjustments/Credits</b>			
<b>16. a.</b> Monthly child care payments actually made			
<b>b.</b> Monthly health insurance payments actually made			
<b>c.</b> Other payments/credits actually made for any noncovered medical, dental and prescription medication expenses of the child(ren) not ordered to be separately paid on a percentage basis. [See section 61.30(8), Florida Statutes]			
<b>17. Total Support Payments actually made</b> [Add 16a through 16c]			
<b>18. Total Additional Support Transfer Amount</b> [Line 15 minus line 17; enter any negative number as zero]			
<b>19. Total Child Support Owed from Father to Mother</b> [Add line 13A plus line 18A]			
<b>20. Total Child Support Owed from Mother to Father</b> [Add line 13B plus line 18B]			
<b>21. Actual Child Support to Be Paid.</b> [Comparing lines 19 and 20, Subtract the smaller amount owed from the larger amount owed and enter the result in the column for the parent that owes the larger amount of support]	\$		

**ADJUSTMENTS TO GUIDELINES AMOUNT.** If you or the other parent is requesting the Court to award a child support amount that is more or less than the child support guidelines, you must complete and file Motion to Deviate from Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943.

[check **one** only]

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

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

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

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

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