

# STEP-PARENT ADOPTION

**THE CLERK'S OFFICE DOES NOT GIVE REFUNDS ON PACKET FEES OR FILING FEES  
NO PERSONAL CHECKS  
NO WHITE OUT**

**You MUST have all forms completed before turning in to Clerk.**

**The Clerk's office does NOT review your documents.**

**It is YOUR responsibility to ensure procedures are followed correctly as you are filing  
as a Self-Represented Litigant.**

**Please do not turn in instruction sheets or unsigned documents.**

**This packet contains the following forms:**

- Civil Cover Sheet
- Petition For Step-Parent Adoption
- Notice of Related Cases
- Disclosure From A Non- Lawyer
- Notice Of Limitations Of Services Provided (both petitioners should sign)
- Uniform Child Custody Jurisdiction Enforcement Act Affidavit – (called UCCJEA)
- Indian Child Welfare Act Affidavit (Must Be Completed)
- Motion for Search of Putative Father Registry
- Application to Search Putative Father Registry
- Order to Search Putative Father Registry
- Consent of Adoptee (if child is over 12 years, this Consent is required)
- Consent of Biological Parent
- Certified Statement of Final Decree
- Administrative Order #2015-06-01 Standing Temporary Family Law Court Order

**You will also need the following items:**

- Certified true copy of the Child's Birth Certificate
- Copy of your Florida Driver's License or Florida ID card

**INSTRUCTIONS:**

- ✓ Complete the packet and provide copies as requested above.
- ✓ Give all of these items to the Clerk with the filing fee.
- ✓ Wait at least **two weeks** to hear from the Case Manager in the Family Law Court Staff office (separate from the Clerk's office). If you do not hear from the Case Manager within two weeks, please contact one of the case managers listed below either by telephone or by email. Please do not call the Clerk's office for updates to your case.
- ✓ **CALL THE CASE MANAGER FOR UPDATES.**

**NOTE: You should keep a copy of the SIGNED Petition, UCCJEA and Financial Affidavit to use for service of process AFTER your case manager contacts you. Otherwise, the Clerk charges \$1.00 per page for copying these documents from your file.**

**Note: Case Managers cannot help you complete the packet. If you need assistance we encourage you to contact an attorney.**

Cary Godwin, Case Manager, 850-718-0480 or [godwinc@jud14.flcourts.org](mailto:godwinc@jud14.flcourts.org)  
(Calhoun, Gulf, Holmes, Jackson, and Washington Counties)

**Packet Fee \$7.35 / Filing Fee \$400**

# **INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.928, COVER SHEET FOR FAMILY COURT CASES (11/13)**

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

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

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

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

Follow these instructions for completing the form:

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

- (D) Dating Violence - all matters relating to injunctions for protection against dating violence pursuant to section 784.046, Florida Statutes.
- (E) Repeat Violence - all matters relating to injunctions for protection against repeat violence pursuant to section 784.046, Florida Statutes.
- (F) Sexual Violence - all matters relating to injunctions for protection against sexual violence pursuant to section 784.046, Florida Statutes.
- (G) Stalking-all matters relating to injunctions for protection against stalking pursuant to section 784.0485, Florida Statutes
- (H) Support - IV-D - all matters relating to child or spousal support in which an application for assistance has been filed with the Department of Revenue, Child Support Enforcement under Title IV-D, Social Security Act, except for such matters relating to dissolution of marriage petitions (sections 409.2564, 409.2571, and 409.2597, Florida Statutes), paternity, or UIFSA.
- (I) Support-Non IV-D - all matters relating to child or spousal support in which an application for assistance has **not** been filed under Title IV-D, Social Security Act.
- (J) UIFSA- IV-D - all matters relating to Chapter 88, Florida Statutes, in which an application for assistance has been filed under Title IV-D, Social Security Act.
- (K) UIFSA - Non IV-D - all matters relating to Chapter 88, Florida Statutes, in which an application for assistance has **not** been filed under Title IV-D, Social Security Act.
- (L) Other Family Court - all matters involving time-sharing and/or parenting plans relating to minor child(ren), support unconnected with dissolution of marriage, annulment, delayed birth certificates pursuant to Florida Statutes section 382.0195, expedited affirmation of parental status pursuant to Florida Statutes section 742.16, termination of parental rights proceedings pursuant to Florida Statutes section 63.087, declaratory judgment actions related to premarital, marital, post-marital agreements, or other matters not included in the categories above.
- (M) Adoption Arising Out Of Chapter 63 - all matters relating to adoption pursuant to Chapter 63, Florida Statutes, excluding any matters arising out of Chapter 39, Florida Statutes.
- (N) Name Change - all matters relating to name change, pursuant to section 68.07, Florida Statutes.
- (O) Paternity/Disestablishment of Paternity – all matters relating to paternity pursuant to Chapter 742, Florida Statutes.
- (P) Juvenile Delinquency - all matters relating to juvenile delinquency pursuant to Chapter 985, Florida Statutes.
- (Q) Petition for Dependency - all matters relating to petitions for dependency.
- (R) Shelter Petition – all matters relating to shelter petitions pursuant to Chapter 39, Florida Statutes.
- (S) Termination of Parental Rights Arising Out Of Chapter 39 – all matters relating to termination of parental rights pursuant to Chapter 39, Florida Statutes.
- (T) Adoption Arising Out Of Chapter 39 – all matters relating to adoption pursuant to Chapter 39, Florida Statutes.
- (U) CINS/FINS – all matters relating to children in need of services (and families in need of services) pursuant to Chapter 984, Florida Statutes.

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

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

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

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

## COVER SHEET FOR FAMILY COURT CASES

### I. Case Style

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

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

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

\_\_\_\_\_  
Petitioner

and

\_\_\_\_\_  
Respondent

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

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

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

- (A) \_\_\_\_ Simplified Dissolution of Marriage
- (B) \_\_\_\_ Dissolution of Marriage
- (C) \_\_\_\_ Domestic Violence
- (D) \_\_\_\_ Dating Violence
- (E) \_\_\_\_ Repeat Violence
- (F) \_\_\_\_ Sexual Violence
- (G) \_\_\_\_ Stalking
- (H) \_\_\_\_ Support IV-D (Department of Revenue, Child Support Enforcement)
- (I) \_\_\_\_ Support Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (J) \_\_\_\_ UIFSA IV-D (Department of Revenue, Child Support Enforcement)
- (K) \_\_\_\_ UIFSA Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (L) \_\_\_\_ Other Family Court
- (M) \_\_\_\_ Adoption Arising Out Of Chapter 63
- (N) \_\_\_\_ Name Change



# INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.981(b)(1), JOINT PETITION FOR ADOPTION BY STEPPARENT (11/15)

## When should this form be used?

This form should be used when a stepparent is adopting his or her spouse's child. Both the stepparent and his or her spouse must sign this petition. You must attach all necessary consents or acknowledgments that apply to your case, as listed under the Special Notes section below. Florida Statutes require that consent to adoption be obtained from:

- The mother of the minor.
- The father of the minor if:
  1. The minor was conceived or born while the father was married to the mother;
  2. The minor is his child by adoption;
  3. The minor has been established by a court proceeding to be his child;
  4. He has filed an affidavit of paternity pursuant to section 382.013(2)(c) Florida Statutes;  
or
  5. In the case of an unmarried biological father, he has acknowledged in writing, signed in the presence of a competent witness, that he is the father of the minor, has filed such acknowledgment with the Office of Vital Statistics of the Department of Health within the required timeframes, and has complied with the requirements of section 63.062(2), Florida Statutes.

Determining whether someone's consent is required, or when consent may not be required is a complicated issue and you may wish to consult an attorney. For more information about consenting to adoption, you should refer to Chapter 63, Florida Statutes, and sections 63.062-63.082 in particular.

This form should be typed or printed in black ink. The name to be given to the child(ren) **after** the adoption should be used in the heading of the petition. The stepparent is the petitioner, because he or she is the one who is asking the court for legal action. After completing this form, you and your spouse must sign it before a notary public or deputy clerk. You should then file the original and 1 copy with the clerk of the circuit court in the county where the minor resides unless the court changes the venue.

## 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 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?

For your case to proceed, you must have the written consent of the other birth parent and the child, if

applicable. The **court** may choose not to require consent to an adoption in some circumstances. For more information about situations where consent may not be required, see section 63.064, Florida Statutes. If you are attempting to proceed without the consent of the other birth parent, you may wish to consult with an attorney. Section 63.054, Florida Statutes, requires that in each adoption proceeding, the Florida Putative Father Registry be searched. You will need an order from the judge to do this, which you can request by filing a **Motion for Search of the Putative Father Registry**, Florida Supreme Court Approved Family Law Form 12.981(a)(6).

When you have filed all of the required forms and met the requirements as outlined above, you are ready to set a **hearing** on your petition. You should check with the clerk of court, **family law intake staff** or the **judicial assistant** to set a **final hearing**. If all persons required to consent have consented and the consents/affidavits of nonpaternity have been filed with the court, the hearing may be held immediately. If not, notice of the hearing must be given as provided by the Rules of Civil Procedure. See Form 1.902, Florida Rules of Civil Procedure. If you know where the other birth parent lives, you should use **personal service**. If you absolutely do not know where he or she lives, you may use **constructive service**. In order to use constructive service you will need to complete and submit to the court **Stepparent Adoption: Affidavit of Diligent Search**, Florida Supreme Court Approved Family Law Form 12.981(a)(4). For more information about personal and constructive service, you should refer to the **“General Instructions for Self-Represented Litigants”** found at the beginning of these forms and the instructions to Florida Family Law Rules of Procedure Forms 12.910(a) and 12.913(b) and Florida Supreme Court Approved Family Law Form 12.913(a). However, the law regarding constructive service is very complex and you may wish to consult an attorney regarding that issue.

### **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.** See Chapter 63, Florida Statutes, and Florida Family Law Rule 12.200(a)(2) for further information.

### **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.

Instructions for Florida Supreme Court Approved Family Law Form 12.981(b)(1), Joint Petition for Adoption by Stepparent (11/15)



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.

### Special notes...

With this petition you must file the following:

- Consent form executed by the birth parent, **Stepparent Adoption: Consent and Waiver by Parent**, Florida Supreme Court Approved Family Law Form 12.981(a)(1) or **Stepparent Adoption: Affidavit of Nonpaternity**, Florida Supreme Court Approved Family Law Form 12.981(a)(3).
- If any person whose consent is required is deceased, a certified copy of the death certificate must be attached to this Petition.
- Consent form executed by the minor child(ren), if the child(ren) is/are over 12 years of age, **Stepparent Adoption: Consent of Adoptee**, Florida Supreme Court Approved Family Law Form 12.981(a)(2). The court can excuse filing of this form under certain circumstances.
- Certified copy of the child(ren)'s birth certificate.
- **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d).
- If applicable, **Stepparent Adoption: Motion for Search of the Putative Father Registry**, Florida Supreme Court Approved Family Law Form 12.981(a)(6).

These family law forms contain a **Final Judgment of Stepparent Adoption**, Florida Supreme Court Approved Family Law Form 12.981(b)(2), 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 a final judgment form with you to the hearing. If so, you should type or print the heading, including the circuit, county case number, division, and the child(ren)'s names, and leave the rest blank for the judge to complete at your hearing. You should decide how many certified copies of the final judgment you will need and be prepared to obtain them after the hearing. There is a charge for certified copies, and the clerk can tell you how much. The file will be sealed after the final hearing, and then it will take an order from a judge to open the file and obtain a copy of the final judgment.

**AN ADOPTIVE STEPPARENT WILL CONTINUE TO HAVE PARENTAL RIGHTS, INCLUDING CUSTODY AND TIME-SHARING, WHERE APPROPRIATE, IN THE EVENT OF A LATER DISSOLUTION OF MARRIAGE, AND MAY BE LIABLE FOR CHILD SUPPORT IN THE EVENT OF A LATER DISSOLUTION OF MARRIAGE. YOU COULD BE LIABLE IN LITIGATION FOR THE ACTIONS OF THE ADOPTEE(S). THIS ADOPTION MAY ALSO AFFECT THE ADOPTEE'S INHERITANCE.**

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: \_\_\_\_\_

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_,  
{use name to be given to the minor child} Adoptee.

### JOINT PETITION FOR ADOPTION BY STEPPARENT

Petitioner, {full legal name} \_\_\_\_\_, being sworn, joined by the above-named child(ren)'s \_\_\_\_\_ mother \_\_\_\_\_ father, {full legal name} \_\_\_\_\_, being sworn, files this joint petition for adoption of the above-named minor child(ren), under chapter 63, Florida Statutes.

1. This is an action for adoption of a minor child(ren) by his or her (their) stepparent.

2. I desire to adopt the following child(ren):

	Name to be given to child(ren)	Birth date	Birthplace
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____
f.	_____	_____	_____

A certified copy of the birth certificate(s) is/are attached.

3. The child(ren) has (have) resided with me since {date} \_\_\_\_\_.  
I wish to adopt the child(ren) because I would like to legally establish the parent-child relationship already existing between the child(ren) and me. Since the above date, I have been able to provide adequately for the material needs of the child(ren) and am able to continue doing so in the future, as well as to provide for the child(ren)'s mental and emotional well-being.

Other reasons I wish to adopt the children are:

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

4. I am \_\_\_\_\_ years old, and have resided at {street address}, \_\_\_\_\_  
{city} \_\_\_\_\_ {county} \_\_\_\_\_ {state} \_\_\_\_\_ for \_\_\_\_\_ years.

5. I married the \_\_\_\_\_ father or \_\_\_\_\_ mother of the child(ren) on {date} \_\_\_\_\_,  
in {city} \_\_\_\_\_ {county} \_\_\_\_\_ {state} \_\_\_\_\_. The following are the

dates and places of my dissolutions of marriage, if any:

Date

Place

- a. \_\_\_\_\_  
b. \_\_\_\_\_

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

7. A description and estimate of the value of any property of the adoptee(s) is as follows:

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

8. Consent by the adoptee(s):

\_\_\_\_\_ is attached for: *Name(s)* \_\_\_\_\_  
\_\_\_\_\_ is not required because the adoptee(s) is/are not 12 years of age: *Name(s)* \_\_\_\_\_  
\_\_\_\_\_ was excused by the court for: *Name(s)* \_\_\_\_\_

9. The following person(s) is/are required to consent and the consent form or affidavit of nonpaternity is/are attached \_\_\_\_\_

10. The following person(s) whose consent is required has not consented. The facts/circumstances that excuse the lack of consent and would justify termination of this person's parental rights are:

Name	Address	Facts/circumstances
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. A copy of this Petition was served on all known persons whose consent is required but did not waive notice, as well as on all persons whose consent is required but did not provide consent. Proof of service is attached.

*{Indicate if applicable}:}*

\_\_\_\_\_ A search of the Putative Father Registry maintained by the Office of Vital Statistics of the Department of Health has been requested, and if granted, the certificate from the State Registrar will be filed in this action.

WHEREFORE, I request that this Court terminate the parental rights of \_\_\_\_\_, *{name of parent whose rights are sought to be terminated}*, enter a Final Judgment of Adoption of the Minor Child(ren) by Petitioner Stepparent and, as requested, change the name of the adoptee(s).

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 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 \_\_\_\_\_

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 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: ( ) parent ( ) stepparent ( ) both .

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 12.900(h), NOTICE OF RELATED CASES (11/13)

### When should this form be used?

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

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

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

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

### What should I do next?

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

### Where can I look for more information?

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

### Special notes . . .

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

Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms **must** also put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

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

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

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

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

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

### NOTICE OF RELATED CASES

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

[check **one** only]

☐ **There are no related cases.**

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

#### Related Case No. 1

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

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

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

Type of Proceeding: [check **all** that apply]

☐ Dissolution of Marriage

☐ Custody

☐ Child Support

☐ Juvenile Dependency

☐ Termination of Parental Rights

☐ Domestic/Sexual/Dating/Repeat

Violence or Stalking Injunctions

☐ Paternity

☐ Adoption

☐ Modification/Enforcement/Contempt Proceedings

☐ Juvenile Delinquency

☐ Criminal

☐ Mental Health

☐ Other {specify} \_\_\_\_\_



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

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

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

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

Relationship of cases check **all** that apply]:

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

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

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

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

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

\_\_\_\_\_

#### **Related Case No. 2**

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

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

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

Type of Proceeding: [check **all** that apply]

\_\_\_\_ Dissolution of Marriage

\_\_\_\_ Paternity

\_\_\_\_ Custody

\_\_\_\_ Adoption

\_\_\_\_ Child Support

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

\_\_\_\_ Juvenile Dependency

\_\_\_\_ Juvenile Delinquency

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

\_\_\_\_ Criminal

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

\_\_\_\_ Mental Health

Violence or Stalking Injunctions

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

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

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

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

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

Relationship of cases check all that apply]:

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

- ☐ may affect court's jurisdiction;  
☐ order in related case may conflict with an order in this case;  
☐ order in this case may conflict with previous order in related case.

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

**Related Case No. 3**

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

Type of Proceeding: [check **all** that apply]

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

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

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

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

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

Relationship of cases check all that apply]:

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

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

2. [check **one** only]

☐ I **do not** request coordination of litigation in any of the cases listed above.

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

3. [check **all** that apply]

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

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

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

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

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

\_\_\_\_\_  
Petitioner's Signature

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

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

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

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

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

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

## CERTIFICATE OF SERVICE

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

\_\_\_\_\_  
Signature of Petitioner/Attorney for Petitioner

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

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

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

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

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

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

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

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

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

This form was completed with the assistance of:

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

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

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

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

**INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE  
FORM 12.900(a)  
DISCLOSURE FROM NONLAWYER (11/12)**

**When should this form be used?**

This form must be used when anyone who is **not** a lawyer in good standing with The Florida Bar helps you complete any Florida Family Law Form. Attorneys who are licensed to practice in other states but not Florida, or who have been disbarred or suspended from the practice of law in Florida, are nonlawyers for the purposes of the Florida Family Law Forms and instructions.

The nonlawyer must complete this form and both of you are to sign it before the nonlawyer assists you in completing any Family Law Form.

**In addition**, on any other form with which a nonlawyer helps you, the nonlawyer shall complete the nonlawyer section located at the bottom of the form unless otherwise specified in the instructions to the form. This is to protect you and be sure that you are informed in advance of the nonlawyer's limitations.

**What should I do next?**

A copy of this disclosure, signed by both the nonlawyer and the person, must be given to the person to retain and the nonlawyer must keep a copy in the person's file. The nonlawyer shall also keep copies for at least 6 years of all forms given to the person being assisted.

**Special Notes**

This disclosure form does **NOT** act as or constitute a waiver, disclaimer, or limitation of liability.

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

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

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

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

and

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

### DISCLOSURE FROM NONLAWYER

{Name} \_\_\_\_\_ told me that he/she is a nonlawyer and may not give legal advice, cannot tell me what my rights or remedies are, cannot tell me how to testify in court, and cannot represent me in court.

Rule 10-2.1(b) of the Rules Regulating The Florida Bar defines a paralegal as a person who works under the supervision of a member of The Florida Bar and who performs specifically delegated substantive legal work for which a member of The Florida Bar is responsible. Only persons who meet the definition may call themselves paralegals. {Name} \_\_\_\_\_, informed me that he/she is not a paralegal as defined by the rule and cannot call himself/herself a paralegal.

{Name} \_\_\_\_\_, told me that he/she may only type the factual information provided by me in writing into the blanks on the form. Except for typing, {name} \_\_\_\_\_, may not tell me what to put in the form and may not complete the form for me. However, if using a form approved by the Supreme Court of Florida, {name} \_\_\_\_\_, may ask me factual questions to fill in the blanks on the form and may also tell me how to file the form.

{Choose **one** only}

\_\_\_\_\_ I can read English.

\_\_\_\_\_ I cannot read English, but this disclosure was read to me [fill in **both** blanks] by  
{name} \_\_\_\_\_ in {language} \_\_\_\_\_, which I understand.

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

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

\_\_\_\_\_  
Signature of **NONLAWYER**

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

Name of Business: \_\_\_\_\_

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

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

**NOTICE OF LIMITATIONS OF SERVICES PROVIDED**

**The personnel in the self-help program are not acting as your lawyer or providing legal advice to you.**

Self-help personnel are not acting on behalf of the court or any judge. The presiding judge in your case may require amendment of a form or substitution of a different form. The judge is not required to grant the relief requested in a form.

The personnel in this self-help program cannot tell you what your legal rights or remedies are, represent you in court, or tell you how to testify in court.

Self-help services are available to all persons who are or will be parties to a family law case.

The information that you give to and receive from self-help personnel is not confidential and may be subject to disclosure at a later date. If another person involved in your case seeks assistance from the self-help program, that person will be given the same type of assistance that you receive.

In all cases, it is best to consult with your own attorney, especially if your case presents significant issues regarding children, child support, alimony, retirement or pension rights, assets or liabilities.

\_\_\_\_\_ I CANNOT READ ENGLISH. THIS NOTICE WAS READ TO ME BY:  
\_\_\_\_\_ IN \_\_\_\_\_.  
(NAME) (LANGUAGE).

\_\_\_\_\_ I CAN READ ENGLISH

\_\_\_\_\_  
SIGNATURE

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

**NOTICE OF LIMITATIONS OF SERVICES PROVIDED**

**The personnel in the self-help program are not acting as your lawyer or providing legal advice to you.**

Self-help personnel are not acting on behalf of the court or any judge. The presiding judge in your case may require amendment of a form or substitution of a different form. The judge is not required to grant the relief requested in a form.

The personnel in this self-help program cannot tell you what your legal rights or remedies are, represent you in court, or tell you how to testify in court.

Self-help services are available to all persons who are or will be parties to a family law case.

The information that you give to and receive from self-help personnel is not confidential and may be subject to disclosure at a later date. If another person involved in your case seeks assistance from the self-help program, that person will be given the same type of assistance that you receive.

In all cases, it is best to consult with your own attorney, especially if your case presents significant issues regarding children, child support, alimony, retirement or pension rights, assets or liabilities.

\_\_\_\_\_ I CANNOT READ ENGLISH. THIS NOTICE WAS READ TO ME BY:  
\_\_\_\_\_ IN \_\_\_\_\_.  
(NAME) (LANGUAGE).

\_\_\_\_\_ I CAN READ ENGLISH

\_\_\_\_\_  
SIGNATURE



**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.902(d)  
UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT  
(UCCJEA) AFFIDAVIT  
(02/18)**

**When should this form be used?**

This form should be used in any case involving parental responsibility for, custody of, or time-sharing or visitation with, any minor child(ren). This **affidavit** is **required** even if the parental responsibility for, custody of, or time-sharing or visitation with, the minor child(ren) is 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** it 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...**

With this form, you must also file a **Notice of Confidential Information within Court Filing**, Florida Rules of Judicial Administration Appendix to Rule 2.420 Form.

Effective October 1, 2008, terms such as custodial parent, noncustodial parent, primary residential parent, secondary residential parent, and visitation were removed from Chapter 61, Florida Statutes; however, because the UCCJEA uses the terms, custody and visitation, they are included in this form. Parents must 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.

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.

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

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

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

and

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

## UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA) AFFIDAVIT

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

1. The number of minor child(ren) subject to this proceeding is \_\_\_\_\_. The name, place of birth, birth date, and sex of each child; the present address, periods of residence, and places where each child has lived **within the past five (5) years**; and the name, present address, and relationship to the child of each person with whom the child has lived during that time are:

### THE FOLLOWING INFORMATION IS TRUE ABOUT CHILD # 1 :

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*			
____/____			
____/____			
____/____			

____/____			
____/____			

**\* 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:**

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

____/____			
____/____			
____/____			
____/____			
____/____			

**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, jurisdiction, or country, concerning parental responsibility for, custody of, or time-sharing or visitation 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, jurisdiction, or country, concerning parental responsibility for, custody of, or time-sharing or visitation with a child subject to this proceeding.

*Explain:*

- Name of each child: \_\_\_\_\_
- Type of proceeding: \_\_\_\_\_
- Court and state: \_\_\_\_\_
- 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 parental responsibility, custody, time-sharing, or visitation proceeding pending in a court of this or any other state, jurisdiction, or country concerning a child subject to this proceeding.

\_\_\_\_\_ I HAVE THE FOLLOWING INFORMATION concerning a parental responsibility, custody, time-sharing, or visitation 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:*

- Name of each child involved in said litigation: \_\_\_\_\_
- Type of proceeding: \_\_\_\_\_
- Court and state: \_\_\_\_\_
- Date of court order or judgment (if any): \_\_\_\_\_
- Case Number: \_\_\_\_\_

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

*[Choose only one]*

\_\_\_\_\_ I DO NOT KNOW OF ANY PERSON in this or any other state, jurisdiction, or country, who is not a party to this proceeding and who has physical custody or claims to have parental responsibility for, custody of, or time-sharing or visitation 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 parental responsibility for, custody of, or time-sharing or visitation with respect to any child subject to this proceeding:

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

\_\_\_\_\_ has physical custody

\_\_\_\_\_ claims parental responsibility or custody rights

\_\_\_\_\_ claims time-sharing or visitation

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

Relationship to child, if any: \_\_\_\_\_

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

\_\_\_\_\_ has physical custody

\_\_\_\_\_ claims parental responsibility or custody rights

\_\_\_\_\_ claims time-sharing or visitation

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

Relationship to child, if any: \_\_\_\_\_

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

\_\_\_\_\_ has physical custody

\_\_\_\_\_ claims parental responsibility or custody rights

\_\_\_\_\_ claims time-sharing or visitation

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

Relationship to child, if any: \_\_\_\_\_

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 other state, jurisdiction, or country..

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

a. Name of each child: \_\_\_\_\_

b. Type of proceeding: \_\_\_\_\_

c. Court and address: \_\_\_\_\_

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

e. Amount of child support ordered to be paid and by whom: \_\_\_\_\_

6. I acknowledge that I have a continuing duty to advise this Court of any parental responsibility, custody, time-sharing or visitation , 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.

7. A completed Notice of **Confidential Information within Court Filing**, Florida Rules of Judicial Administration Appendix to Rule 2.420 Form, is filed with this Affidavit.

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

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

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

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

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

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

Designated 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: \_\_\_\_\_

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**} \_\_\_\_\_ 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 12.981(a)(5), INDIAN CHILD WELFARE ACT AFFIDAVIT (11/15)

## When should this form be used?

This form should be used in cases involving stepparent adoption of a child. This **affidavit** is **required**.

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 pleading 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.

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

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

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

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

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_,  
{use name to be given to the minor child(ren)} Adoptee(s).

### INDIAN CHILD WELFARE ACT AFFIDAVIT

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

Upon information and belief the child \_\_\_\_\_ {name} subject to this proceeding: {choose **one** only}

1. \_\_\_\_\_ is not an Indian child. The Indian Child Welfare Act does not apply to this proceeding.
2. \_\_\_\_\_ is an Indian child within the meaning of the Indian Child Welfare Act of 1978 (25 U.S.C. Section 1901 et seq.).

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 affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

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

\_\_\_\_\_  
Signature of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
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}* (    ) 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 12.981(a)(6), MOTION FOR SEARCH OF THE PUTATIVE FATHER REGISTRY (11/15)**

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

This form should be used when a stepparent is adopting his or her **spouse's** child. Section 63.054, Florida Statutes, requires that a search of Florida's Putative Father Registry be conducted in every adoption proceeding. The Office of Vital Statistics of the Department of Health has an application available called Florida Putative Father Registry - Application for Search which should be completed and attached to this form. The Office of Vital Statistics is allowed to charge for searching the registry. You may wish to contact that office in advance to find out what amount and method of payment will be accepted.

This form should be typed or printed in black ink. The name to be given to the adoptee **after** the adoption should be used in the heading of the **petition**. The stepparent is the **petitioner**, because he or she is the one who is asking the court for legal action. You must have your signature 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 you have filed the **Joint Petition for Adoption by Stepparent**, Florida Supreme Court Approved Family Law Form 12.981(b)(1) and keep a copy for your records. These family law forms contain an **Order Granting Motion for Search of Putative Father Registry**, Florida Supreme Court Approved Family Law Form 12.981(a)(7), which the judge may use. You should check with the clerk, family law intake staff or judicial assistant to see if you need to provide this form order to the judge with your motion. If so, you should type or print the heading, including the circuit, county, case number, division, and the child(ren)'s name, and leave the rest blank for the judge to complete.

## **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?**

If the judge grants your motion, you will need to take the order, your completed application, and any fee to the Office of Vital Statistics. That office will conduct the search and file the results with the clerk of court. You may call the clerk's office to determine when the results have been filed in order to set a final hearing.

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

**Before proceeding, you should read General Information for Self-Represented Litigants found at the**

**beginning of these forms.** See Chapter 63, Florida Statutes, and Florida Family Law Rule 12.200(a)(2) for further information.

### **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.

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

#### **THIS ADOPTION MAY AFFECT THE ADOPTEE'S INHERITANCE.**

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: \_\_\_\_\_

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_,  
{use name to be given to the minor child} Adoptee.

## **MOTION FOR SEARCH OF THE PUTATIVE FATHER REGISTRY**

Petitioner, *{full legal name}* \_\_\_\_\_, files this Motion for Search of the Putative Father Registry, pursuant to Chapter 63, Florida Statutes, and states:

1. This is an action for adoption of a minor by the child's stepparent, who is the Petitioner. .
2. Section 63.054, Florida Statutes, requires that in every adoption, a search of the Putative Father Registry maintained by the Department of Health, Office of Vital Statistics be conducted. Section 63.0541, Florida Statutes, makes information maintained by the Registry confidential and exempt from public disclosure, except that it may be disclosed to adoption entities, registrant unmarried biological fathers, and the court, upon issuance of a court order concerning a petitioner acting pro se.
3. The Florida Putative Father Registry - Application for Search is completed and attached to this Motion.

**WHEREFORE**, I request that this Court enter an Order Granting Motion for Search of the Putative Father Registry.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this motion 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 petitioner.

This form was completed with the assistance of:

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





# FLORIDA PUTATIVE FATHER REGISTRY

## APPLICATION FOR SEARCH

CAREFULLY READ the information provided on the reverse of this form. PLEASE PRINT CLEARLY

### Part 1 PUTATIVE FATHER'S (REGISTRANT) INFORMATION (If date of birth unknown, provide approximate age of father)

FULL NAME OF REGISTRANT	FIRST	MIDDLE	LAST INCLUDING ANY SUFFIX	DATE OF BIRTH
ADDRESS OF REGISTRANT	STREET	CITY	STATE	ZIPCODE
PHYSICAL DESCRIPTION OF FATHER				

### Part 2 CONCEPTION INFORMATION

DATE OF CONCEPTION (MONTH, DAY, YEAR)	PLACE AND LOCATION OF CONCEPTION (Not limited to, but should include city and state)
---------------------------------------	--

### Part 3 MOTHER'S INFORMATION (If date of birth unknown, provide approximate age of mother)

FULL MAIDEN NAME OF MOTHER	FIRST	MIDDLE	MAIDEN SURNAME	
LEGAL SURNAME OF MOTHER	LEGAL SURNAME	DATE OF BIRTH		
ADDRESS OF MOTHER	STREET	CITY	STATE	ZIP CODE
PHYSICAL DESCRIPTION OF MOTHER				

### Part 4 CHILD'S INFORMATION (If exact date of birth unknown, provide estimated date of birth)

FULL NAME OF CHILD	FIRST	MIDDLE	LAST INCLUDING SUFFIX	SEX
DATE OF BIRTH	CITY OF BIRTH	COUNTY OF BIRTH	STATE OF BIRTH	

The \$9.00 search fee includes the issuance of a certificate signed by the State Registrar certifying that:

- The identity and contact information, if any, for each registered unmarried biological father whose information matches the search request sufficiently so that such person may be considered a possible father of the subject child;

OR

- That a diligent search has been made of the registry of putative fathers who may be the unmarried biological father of the subject child and that no matching registration has been located in the registry.

**\$ 9.00**

**RUSH ORDERS (Optional):** For Rush Orders, there is a \$10.00 additional fee per order. Check the appropriate box. If RUSH service is desired, enter \$10.00 in the amount column. Mark your envelope **"RUSH"**. **RUSH SERVICE DESIRED** ☐ Yes ☐ No

**TOTAL AMOUNT ENCLOSED:** Check or Money Order payable to Vital Statistics. International payments should be made by Cashiers Check or Money Order in U. S. Dollars. **(DO NOT SEND CASH) Florida Law imposes an additional service charge of \$15.00 for dishonored checks.**

Any person who willfully and knowingly provides any false information in a certificate, record, or report required by Chapter 382, Florida Statutes, or in an application or affidavit, or who obtains confidential information contained in any Vital Record under false or fraudulent purposes, commits a felony of the third degree, punishable as provided in Chapter 775, Florida Statutes.

### APPLICANT NAME/DELIVERY INFORMATION

APPLICANT NAME	FIRST	MIDDLE	LAST	SUFFIX
DELIVERY ADDRESS (INCLUDE APT. NUMBER, IF APPLICABLE)	CITY		STATE	ZIP CODE
HOME PHONE NUMBER INCLUDING AREA CODE	WORK PHONE NUMBER INCLUDING AREA CODE	SIGNATURE OF APPLICANT		
IF ATTORNEY or AGENCY, PROVIDE BAR/LICENSE NUMBER	IF ATTORNEY, PROVIDE NAME OF PERSON YOU REPRESENT AND THEIR RELATIONSHIP TO CHILD			
IF THE CERTIFICATION IS TO BE MAILED TO ANOTHER PERSON OR ADDRESS USE THE SPACES BELOW TO SPECIFY SHIP TO NAME AND ADDRESS.				
SHIP TO NAME TYPE OR PRINT	FIRST	MIDDLE	LAST	SUFFIX
DAYTIME PHONE NUMBER ( )	SHIP TO STREET ADDRESS (AND APT.)			
	CITY	STATE	ZIP CODE	

# INFORMATION AND INSTRUCTIONS FOR FLORIDA PUTATIVE FATHER SEARCH

This form is to be used **only** when a search of the Putative Father Registry is requested. **DO NOT** use to file a Claim of Paternity. Use Claim of Paternity, DH Form 1965, for filing with the Florida Putative Father Registry.

**NOTE:** To enable a thorough search it is important that you provide as much information as known regarding the putative father, mother and child.

**ELIGIBILITY:** All information contained in the Florida Putative Father Registry is confidential and exempt from public disclosure. Information from the registry shall only be disclosed to:

- a) An adoption entity in connection with the planned adoption of a child.
- b) The registrant unmarried biological father, upon receipt of his notarized request.
- c) The court, upon issuance of a court order concerning a petitioner acting pro se in an action under Chapter 63, Florida Statutes.
- d) Birth mother, upon receipt of a notarized request for a copy of any registry entry in which she is identified as the birth mother.

**“Adoption Entity”** as defined in s. 63.032(3), Florida Statutes, means the department, an agency, a child-caring agency registered under s. 409.176 Florida Statutes, an intermediary, or a child-placing agency licensed in another state which is qualified by the department to place children in the State of Florida.

**“Department”** as defined in 63.032(8), Florida Statutes, means the Department of Children and Family Services.

**“Agency”** as defined in 63.032(5), Florida Statutes, means any child-placing agency licensed by the department pursuant to s. 63.202 to place minors for adoption.

**“Intermediary”** as defined in 63.032(9), Florida Statutes, means an attorney who is licensed or authorized to practice in this state and who is placing or intends to place a child for adoption, including placing children born in another state with citizens of this state or country or placing children born in this state with citizens of another state or country.

The Bureau of Vital Statistics has no legislative requirement for following up with an applicant after the initial search and advising of any claim that has been received subsequent to the initial search. Depending on where you are at in the legal proceedings process, this may mean that you must again search the registry for filing with the court. Florida law requires that the registry be searched at the time a Petition for Termination of Parental Rights or adoption proceedings are filed.

**RESPONSE TIME:** Response time for processing a request varies depending upon our workload at the time your request is received. Generally, a request is completed within five work days. RUSH processing is available for those who need assurance of faster service. Orders received in an envelope marked RUSH and with the \$10.00 RUSH fee will be given priority over other pending work; however, no certification can be issued until all requirements, forms, applicable fees and appropriate signatures have been received and meet the criteria as established by law or in rules of the department.

**\*\*\*To be used only when the applicant is a Putative Father who has filed a Claim of Paternity or Birth Mother\*\*\***

## NOTARIZED AFFIDAVIT OF PUTATIVE FATHER OR BIRTH MOTHER

<i>I do hereby swear or affirm that I am the registrant and request search of the Florida Putative Father Registry for a copy of my registry entry. I have attached a copy of photo identification.</i>		<input type="checkbox"/> Personally Known or <input type="checkbox"/> Produced Identification
<hr/> Printed Name <hr/> Signature		Type of Identification Produced
State of _____ County of _____ Subscribed and sworn before me this _____ day of _____, 20 _____  Printed Name of Notarizing Official  Signature of Notarizing Official		(Place Notary Stamp Here)

**MAIL TO: DEPARTMENT OF HEALTH, VITAL STATISTICS, P.O. BOX 210, Jacksonville, FL 32231-0042**  
Visit our website at: <http://www.floridahealth.gov>

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

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

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

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_,  
{use name to be given to the minor child} Adoptee.

### **ORDER GRANTING MOTION FOR SEARCH OF THE PUTATIVE FATHER REGISTRY**

Upon consideration of Petitioner's Motion for Search of the Putative Father Registry, this Court finds:

1. This is an action for adoption of a minor by the child's stepparent, Petitioner, who is proceeding pro se.
2. Section 63.054, Florida Statutes, requires that in every adoption, a search of the Putative Father Registry maintained by the Department of Health, Office of Vital Statistics be conducted. Section 63.0541, Florida Statutes, makes information maintained by the Registry confidential and exempt, except that it may be disclosed to adoption entities, registrant unmarried biological fathers, the birth mother, and the court, upon issuance of a court order concerning a petitioner acting pro se.

NOW, THEREFORE, IT IS ORDERED THAT:

1. The Office of Vital Statistics, Department of Health shall conduct a search of the Putative Father Registry upon receipt of a completed application and payment of any authorized fee.
2. The State Registrar shall issue a certificate indicating the results of such search which shall be filed in this proceeding by transmitting the certificate to the clerk of court.

DONE and ORDERED on: \_\_\_\_\_ in \_\_\_\_\_, Florida.

\_\_\_\_\_  
Circuit Judge

I certify that a copy of the *{name of document(s)}* \_\_\_\_\_  
was (    ) mailed (    ) faxed and mailed (    ) e-mailed (    ) hand-delivered to the parties and to any other  
persons or entities listed below on *{date}* \_\_\_\_\_.

\_\_\_\_\_  
By: Clerk of Court, Designee, or Judicial Assistant

Petitioner (or his or her attorney)

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

State Registrar, Office of Vital Statistics

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.981(a)(2),  
STEPPARENT ADOPTION: CONSENT OF ADOPTEE (03/15)**

**When should this form be used?**

This form must be completed and signed by the person being adopted, the adoptee, if he or she is **over 12 years of age**, unless the court, in the best interest of the minor excuses the minor's consent. It must be signed in the presence of a **notary public** or **deputy clerk** and two witnesses other than the notary public or deputy clerk.

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 the **Joint Petition for Adoption by Stepparent**, Florida Supreme Court Approved Family Law Form 12.981(b)(1) is 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.**

**Special notes...**

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

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

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

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

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_  
{use name to be given to the child(ren)} Adoptee(s).

### CONSENT OF ADOPTEE

1. I, {full legal name} \_\_\_\_\_, being over the age of 12, consent to my adoption by {name} \_\_\_\_\_, to be his/her legal child and heir at law.
2. I have been told of my right to choose a person who does not have an employment, professional, or personal relationship with the adoption entity or prospective adoptive parents to be present when this affidavit is executed and to sign it as a witness. The witness I selected is: {full legal name} \_\_\_\_\_.
3. {Choose only one}  
( ) I consent to my name being legally changed to {specify} \_\_\_\_\_.  
( ) I do **not** consent to a name change.

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

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

\_\_\_\_\_  
Signature of Adoptee

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

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

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

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

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

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

\_\_\_\_\_

\_\_\_\_\_  
Signature of Witness

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

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

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

Driver's License No.: \_\_\_\_\_

State ID Card No.: \_\_\_\_\_

\_\_\_\_\_  
Signature of Witness

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

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

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

Driver's License No.: \_\_\_\_\_

State ID Card No.: \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on  
{date} \_\_\_\_\_

.

\_\_\_\_\_  
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**} ( ) adoptee ( ) stepparent

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 12.981(a)(1), STEPPARENT ADOPTION: CONSENT AND WAIVER BY PARENT (11/15)**

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

This form is to be completed and signed by the parent who is giving up all rights to, custody of, and time- sharing with the minor child to be adopted. This consent shall not be executed before the birth of the minor child. For more information about consenting to adoption, you should refer to Chapter 63, Florida Statutes, and sections 63.062-63.082, Florida Statutes, in particular.

This form should be typed or printed in black ink. It must be signed in the presence of a **notary public** or **deputy clerk** and two witnesses other than the notary or clerk. You should **file** this form with the **Joint Petition for Adoption by Stepparent**, Florida Supreme Court Approved Family Law Form 12.981(b)(1).

After completing this form, you should hand deliver a copy or duplicate original to the parent giving consent and have them sign the original saying they received a copy. Then you should file the original with the **clerk of the circuit court** in the county where the **Joint Petition for Adoption by Stepparent**, Florida Supreme Court Approved Family Law Form 12.981(b)(1) is 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.

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

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

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

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

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

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_  
{use name to be given to minor child(ren)} Adoptee(s).

### CONSENT AND WAIVER BY PARENT

1. I, {full legal name} \_\_\_\_\_, am the {Choose only one}  
\_\_\_\_\_ father **or** \_\_\_\_\_ mother of the minor child(ren) subject to this consent who is/are:

	Child's Current Name	Gender	Birth date	Birthplace {city, county, state}
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____
e.	_____	_____	_____	_____
f.	_____	_____	_____	_____

2. I relinquish all rights to, custody of, and time sharing with this (these) minor child(ren),  
{name(s)} \_\_\_\_\_,  
with full knowledge of the legal effect of the stepparent adoption and consent to the adoption  
by the child(ren)'s stepparent whose name is: {Choose only one}  
\_\_\_\_\_ {name} \_\_\_\_\_  
\_\_\_\_\_ not required for my granting of this consent.

3. I understand my legal rights as a parent and I understand that I do not have to sign this consent and release of my parental rights. I acknowledge that this consent is being given knowingly, freely, and voluntarily. I further acknowledge that my consent is not given under fraud or duress. I understand that there is a "grace period" in Florida during which I may revoke my consent. If the child to be adopted is older than 6 months at the time of consent, this grace period is for 3 business days. The term "business day" means any day on which the United States Postal Service accepts certified mail for delivery. I understand that, in signing this consent, I am permanently and forever giving up all my parental rights to and interest in this (these) minor child(ren) and that this consent may only be withdrawn if the Court finds it was obtained by fraud or duress. I voluntarily, permanently relinquish all my parental rights to this (these) minor child(ren).

4. I consent, release, and give up permanently, of my own free will, my parental rights to this

(these) minor child(ren), for the purpose of stepparent adoption.

5. I waive any further notice of the stepparent adoption proceeding.
6. I understand that pursuant to Chapter 63, Florida Statutes, "an action or proceeding of any kind to vacate, set aside, or otherwise nullify a judgment of adoption or an underlying judgment terminating parental rights on any ground may not be filed more than 1 year after entry of the judgment terminating parental rights."
7. I understand I have the right to choose a person who does not have an employment, professional, or personal relationship with the adoption entity or the prospective adoptive parents to be present when this affidavit is executed and to sign it as a witness. The witness I selected is: *{full legal name}* \_\_\_\_\_.

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

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

Signature of Parent: \_\_\_\_\_

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

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

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

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

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

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

\_\_\_\_\_

\_\_\_\_\_  
Signature of Witness

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

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

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

Driver's License No.: \_\_\_\_\_

State ID Card No.: \_\_\_\_\_

\_\_\_\_\_  
Signature of Witness

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

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

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

Driver's License No.: \_\_\_\_\_

State ID Card No.: \_\_\_\_\_

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

Sworn to or affirmed and signed before me on {date} \_\_\_\_\_ .

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

\_\_\_\_\_  
*{Print, type, or stamp commissioned name of notary or  
deputy clerk.}*

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

I hereby acknowledge receipt of a copy or duplicate original of this executed **Consent and Waiver**.

\_\_\_\_\_  
Signature of Parent

**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} \_\_\_\_\_.



State of Florida  
Department of Health - Office of Vital Statistics

**CERTIFIED STATEMENT OF FINAL DECREE OF ADOPTION**  
(Important – Read Information and Instructions on reverse side before completion.)

**A. INFORMATION REGARDING ORIGINAL STATUS OF CHILD**

Birth Certificate No. \_\_\_\_\_  
(If Known)

1a. Child's Name \_\_\_\_\_  
First Middle Last

1b. Child's Sex \_\_\_\_\_

1c. Child's Date of Birth \_\_\_\_\_ 1d. Child's Place of Birth \_\_\_\_\_  
City State Country

2a. Name of Father/Parent \_\_\_\_\_  
First Middle Last Name Prior to First Marriage (if applicable) Suffix

2b. Father's/Parent's Race \_\_\_\_\_

3a. Name of Mother/Parent \_\_\_\_\_  
First Middle Last Name Prior to First Marriage (if applicable) Suffix

3b. Mother's/Parent's Race \_\_\_\_\_

**B. INFORMATION FOR A NEW CERTIFICATE OF BIRTH**

1. Child's Name After Adoption \_\_\_\_\_  
(As shown in Final Judgment of Adoption) First Middle Last Suffix

FATHER/PARENT MOTHER/PARENT

2a. Name: \_\_\_\_\_ 3a. Name: \_\_\_\_\_  
First Middle Last Suffix First Middle Last Suffix

2b. Name prior to first marriage (if applicable) \_\_\_\_\_ 3b. Name prior to first marriage (if applicable) \_\_\_\_\_

2c. Birth Date: \_\_\_\_\_ 3c. Birth Date: \_\_\_\_\_

2d. Birth Place: \_\_\_\_\_ 3d. Birth Place: \_\_\_\_\_

2e. Race: \_\_\_\_\_ 3e. Race: \_\_\_\_\_

2f. Social Security Number: \_\_\_\_\_ 3f. Social Security Number: \_\_\_\_\_

4. Residence Address of Adoptive Parent(s) at Time of Adoption:

Street, Apt. No. or Rural Route Number City, Town, or Location County State Zip Code Inside City Limit (Y/N)

5. Mailing address if different from residence address: \_\_\_\_\_

6. Is this a single parent adoption? \_\_\_\_ Yes \_\_\_\_ No

7. Is this a stepparent or other relative adoption? \_\_\_\_ Yes \_\_\_\_ No If yes, please state relationship \_\_\_\_\_

8. Person completing Part A and B of this Form:

8a. Name: \_\_\_\_\_  
Type or Print

8b. Relationship/Title \_\_\_\_\_  
(If agency, list agency name & License #)

8c. Signature \_\_\_\_\_  
Signature of Person Completing Form

8d. Telephone \_\_\_\_\_  
Area Code and Number

9a. Attorney/Pro Se Petitioner \_\_\_\_\_  
Type or Print

9b. Bar No. \_\_\_\_\_ 9c. Telephone \_\_\_\_\_  
Area Code and Number

9d. Address \_\_\_\_\_  
Street City State Zip Code

*"For infant adoptions: If you are interested in obtaining information on Florida's Health Start Program and potential services available for your infant, please call the Healthy Baby Hotline at 1-800-45- BABY (1-800-451-2229) and identify yourself as an adoptive parent."*

**C. CERTIFICATE OF CLERK OF CIRCUIT COURT**

Court Docket No. \_\_\_\_\_

1. On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the Circuit Court of \_\_\_\_\_ County, \_\_\_\_\_  
Judge \_\_\_\_\_ presiding, ordered a decree of adoption in the case of the child and the parents described above.

2a. Signed and Sealed by \_\_\_\_\_ 2b. Date \_\_\_\_\_  
Clerk of Circuit Court

# INSTRUCTIONS

## TYPE OR PRINT IN BLACK INK

*(Prompt submission of this statement, when properly completed, will ensure the timely filing of a new birth certificate.)*

Pursuant to §. 63.152, Florida Statutes, within 30 days after entry of a judgment of adoption, the clerk of the court, and in agency adoptions, any child-placing agency licensed by the department, shall prepare a certified statement of the entry for the State Registrar of Vital Statistics on a form provided by the registrar. A new birth record containing the necessary information supplied by the certificate shall be issued by the registrar on application of the adoptive parent(s) or the adopted person.

Provide all information. This will ensure timely filing of a new birth certificate. Providing contact information is critical in case contact with the person completing the form and/or the attorney is needed to obtain additional or clarifying information.

**Section B.** Complete all information regarding both mother/parent and father/parent regardless of whether a stepparent adoption or two new parents. This information is required for completion of a new birth certificate. In the case of a stepparent adoption, the information allows us to verify information already on file.

**Fee:** Florida law requires a \$20.00 fee made payable to “The Office of Vital Statistics” for filing a new birth certificate for a Florida birth resulting from adoption. This fee includes the issuance of one certification of the new certificate. Certification of the new certificate cannot be provided prior to the payment of this fee. If the fee is accompanying this statement, please **DO NOT** send cash. Please send a check or money order made payable to the Office of Vital Statistics. DH Form 429, Application for Amendment to Florida Birth Record, should be used when remitting the fee. This will ensure that the new certificate is mailed to the appropriate party as listed on the application.

If the fee is not remitted at the time of the submission of this statement, the birth record, if the birth occurred in Florida, shall be amended and the record flagged for collection of the Amendment/Processing fee at the time certification of the new record is requested.

Upon receipt of the report of adoption from a clerk of the court, as heretofore provided for, or upon receipt of a certified copy of a final decree of adoption, together with all necessary information, the State Registrar shall make and file a new birth certificate. All names and particulars entered in the new certificate shall refer to the adoptive parents. The original birth record and court documents shall be sealed only to be opened pursuant to a court order or other provision as may be provided for in Florida law.

Form is also used for adoption of foreign child pursuant to §. 382.017, F.S. which allow the creation of a Certificate of Foreign Birth. Forms may be obtained through our website below.

**OUT OF STATE BIRTHS – ADOPTIONS GRANTED IN FLORIDA:** Although birth certificates for these children are not placed on file in our state, the adoption report sent to our office from the court shall be forwarded to the appropriate registration authority in the state of birth. **DO NOT** remit the fee when the birth occurred outside of the State of Florida.

If you have any questions regarding the completion of this form, you may contact the Office of Vital Statistics at (904) 359-6900, ext. 9001.

### **MAIL THIS FORM WITH PAYMENT AND APPLICATION (DH 429) TO:**

DEPARTMENT OF HEALTH  
OFFICE OF VITAL STATISTICS  
ATTN: ADOPTION UNIT  
P.O. BOX 210,  
Jacksonville, FL 32231-0042  
(Street Address: 1217 North Pearl Street, Jacksonville, Florida, 32202)

### **PLEASE VISIT OUR WEBSITE:**

[www.floridahealth.gov/certificates](http://www.floridahealth.gov/certificates)



**IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT IN AND FOR  
WASHINGTON COUNTY, FLORIDA**

**ADMINISTRATIVE ORDER #2015-06-01**

**RE: STANDING TEMPORARY FAMILY LAW COURT ORDER**

**WHEREAS**, the Fourteenth Judicial Circuit is committed to developing and implementing a fully integrated, comprehensive and efficient approach to handling all cases involving children and families; and

**WHEREAS**, it is necessary to establish procedures which will effectively resolve disputes involving children and families in a fair and efficient manner;

**WHEREAS**, it is in the best interest of the parties in a family law case to learn about their duties and responsibilities and that the parties preserve their assets and comply with the court rules;

**WHEREAS**, it has been made known to the undersigned that the establishment of a Standing Temporary Family Law Court Order dealing with the parties' responsibilities in original actions of dissolution of marriage, as well as actions for alimony, paternity determination, parental responsibility and timesharing, and supplemental proceedings related thereto, is necessary for the efficient and proper administration of justice;

**NOW, THEREFORE, IT IS ORDERED AND ADJUDGED** the following shall apply to Washington County cases:

**1. STANDING TEMPORARY FAMILY LAW COURT ORDER:**

- a. A Standing Temporary Family Law Court Order attached hereto as Exhibit A, will be issued by the Washington County Clerk of Court in original actions of dissolution of marriage, as well as actions for alimony, paternity determination, parental responsibility and timesharing, and supplemental proceedings related thereto.
- b. The Petitioner must serve a copy of the Order with the Summons and the Petition.



**CERTIFIED TRUE COPY**

**LORA C. BELL  
CLERK OF COURT**

**BY:**

*[Signature]*  
**Deputy Clerk**

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**2. PARENTING EVALUATORS:**

- a. The parties may be ordered to confer with a Mental Health Professional for an independent evaluation pursuant to Florida Family Law Rules of Procedure 12.363 at any time during the pendency of their case.
- b. The cost of an evaluation shall be an item addressed in the Final Judgment; however, absent an agreement or Order of the Court, each party shall pay one-half of the cost of evaluation pending a temporary hearing or final hearing determination.

**3. CASE MANAGEMENT CONFERENCES:**

- a. Pursuant to Florida Family Law Rules of Procedure 12.200, a case management conference may be ordered by the court at any time on the court's initiative. A party may request a case management conference thirty (30) days after service of a petition or complaint.
- b. Court-set case management conferences require the personal attendance of both parties and their counsel of record, if any. In lieu of appearance at a court-set case management conference, the parties may submit a Stipulated Case Management Plan and Order to the assigned Judge five (5) days prior to the date of the court-set case management conference. If the Stipulated Case Management Plan is approved by the Judge, the court-set case management conference will be cancelled. A Stipulated Case Management Plan and Order form can be downloaded at the Circuit's website at [www.jud14.flcourts.org](http://www.jud14.flcourts.org).
- c. Completed Stipulated Case Management Plans and Orders should be emailed to [familycm@jud14.flcourts.org](mailto:familycm@jud14.flcourts.org).

**4. NOTICE OF RELATED CASES:**

Pursuant to Florida Rule of Judicial Administration 2.545(d), the Petitioner is required to file and serve on all parties a Notice of Related Cases.

**5. SETTING TRIAL:**

- a. Mediation is required in all cases in accordance with Administrative Order 2014-00-07.
- b. If the case is not resolved at mediation or otherwise, a fifteen minute pre-trial conference shall be scheduled at least thirty (30) days before a final hearing. The purpose of the conference shall be for a determination of whether the trial may be simplified or for any other purpose pursuant to Florida Family Law Rules of Procedure 12.200(b).



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- c. A Pre-Trial Catalogue (Exhibit B) in compliance with the form referenced in this Order shall be filed by each party and a copy delivered to each party and the trial judge. The Pre-Trial Catalogue of each party must be filed no later than forty-eight (48) hours prior to the pre-trial conference. Failure of counsel or a party to fully and completely comply with this process may result in cancellation of any final hearing and imposition of other appropriate sanctions.
- d. The primary purpose of the Pre-Trial Catalogue is to provide the Court with information for the consideration of a Final Judgment.
- e. Actions shall be set for trial in accordance with Florida Family Law Rules of Procedure 12.440.


**6. PROFESSIONALISM**

All counsel appearing before this Court shall strictly adhere to the Florida Supreme Court Rules Regulating the Florida Bar, Guidelines of Professional Conduct, Professionalism Expectations as promulgated by the Florida Bar Board of Governors, and the Creed of Professionalism to which all attorneys are bound. The Court strongly suggests all Family Law Attorneys become familiar with the tenants of the American Academy of Matrimonial Lawyers, Bounds of Advocacy (May 2004). All parties and counsel shall fully comply with this order.

**DONE AND ORDERED** in Chambers at Panama City, Bay County, Florida, this 15<sup>th</sup> day of April, 2015.



CHRISTOPHER N. PATTERSON  
Circuit Judge



HENTZ MCCLELLAN  
Chief Judge

Exhibit A

**IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT  
IN AND FOR HOLMES COUNTY, FLORIDA**

**BOOK 1014 PAGE 506**

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

vs

Case: \_\_\_\_\_

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

**STANDING TEMPORARY FAMILY LAW COURT ORDER**

Pursuant to Administrative Order, 2015-04-01, this order applies to both parties in original actions of dissolution of marriage, as well as actions for alimony, paternity determination, parental responsibility and timesharing, and any supplemental proceeding related thereto, and is necessary for the efficient and proper administration of justice.

1. **PARENTING COURSE:** If the parties have minor children, each party is required to attend and successfully complete a parent education and family stabilization course as required by Florida law (Florida Statutes 61.21). A list of approved providers may be obtained from the Clerk of Court. All parties must file a copy of their certificate of completion with the court. Completion of this course is mandatory.
2. **NO RELOCATION OF THE CHILDREN:** In accord with Florida Statute 61.13001, neither party may permanently remove, cause to be removed, permit the removal of any minor children of the parties from their current residence without written agreement of both parents or an Order of this court. Neither party may change a child's customary school district or daycare arrangement without the written agreement of both parties, or an Order of this Court.
3. **PARENTING:** The safety, financial security, and well-being of the minor children involved in this case are the Courts' primary concern. It is the law, except in certain rare circumstances, that both parents will share parental responsibility for all minor children involved in this case. The law requires parents to share the minor children's time and to participate together in making all important decisions concerning the minor children. If the parents choose to live apart while this action is pending, both parents must assist the minor children in having personal, telephonic, and written contact with the other party. This provision does not apply if a Court Order to the contrary has been entered.
4. **FINANCIAL DISCLOSURE:** Pursuant to Rule 12.285(b), Florida Family Law Rules of Procedure, each party must file a Family Law Financial Affidavit (form 12.902 (b) or (c)) with the Clerk of Court, ten (10) days prior to the first hearing where financial relief is sought by either party, or ten (10) days prior to a Case Management Conference, whichever is first.
5. **DISPOSITION OF ASSETS/ACCOUNTING:** Neither party may sell, transfer, encumber, conceal, assign, remove, or in any way dispose of any property, individually or jointly held by the parties, without the written consent of the other party, or without an order of the Court, except in the usual course of business, or for customary and usual household expenses. Neither party may conceal, hoard or waste jointly owned funds, whether in the form of cash, bank accounts, or other liquid

Exhibit A

assets. The use of funds or income after separation must be accounted for and justified as reasonable for the necessities of the party or to preserve marital assets or pay marital debt. Both parties are accountable for all money and property in their possession during the marriage and after separation.

6. **ADDITIONAL DEBT:** Neither party shall incur any unreasonable debts, including, but not limited to, further borrowing against a credit line secured by a family residence, further encumbering any assets, nor unreasonable use of credit/bank cards or cash advances against said cards, except by written consent of the parties or order of this court. The parties are urged to temporarily stop using joint credit cards except for absolute necessities and only as a last resort. Joint credit cards should only be used for the necessities of life and any party using a joint credit card after separation must be prepared to justify all charges as reasonable and necessary.
7. **PERSONAL AND BUSINESS RECORDS/INSURANCE:** Neither party may directly or indirectly conceal from the other or destroy any family records, business records or any records of income, debt, or other obligations. Any insurance policies in effect at the time of the filing of the Petition herein was filed may not be terminated, allowed to lapse, concealed, modified, borrowed against, pledged or otherwise encumbered by either of the parties or at the direction of either party. All insurance policies of every kind (to include life, medical, dental and hospital and vehicle, homeowner's and all others) may not be changed and shall remain in full force and effect except by written agreement of the parties or order of the court. The parties shall continue to pay all premiums on a timely basis unless there is a written consent of both parties or an Order of the Court.
8. **CASE MANAGEMENT CONFERENCES:** Throughout the pendency of this case, the parties shall be required to attend periodic case management conferences to address the status of the case with the Court. Please note that the Court requires the personal attendance of all parties and attorneys at all court-set case management conferences, unless the parties have filed a Stipulated Case Management Plan and Order prior to a court-scheduled case management conference.
9. **MEDIATION:** Per Circuit Administrative Order 2014-00-07, mediation is encouraged early in the proceedings and the first mediation conference shall take place within sixty (60) days of the order directing compliance.
10. **SERVICE AND APPLICATION OF THIS ORDER:** The Clerk of Court shall docket and provide each Petitioner with a copy of this Order. The Petitioner shall serve a copy of this Order with the Petition. The terms of this Order are effective with regard to the Petitioner upon filing of the Petition. The terms of this Order are effective with regard to the Respondent upon service of the Summons and Petition, or upon waiver and acceptance of service. The terms of this Order will remain in place during the pendency of this action unless modified, terminated or amended by further Order of the Court. This entire Order will terminate once a final judgment is entered or the cause is dismissed.

**DONE AND ORDERED** in Chambers at Bonifay, Florida, this 15<sup>th</sup> day of April, 2015.



CHRISTOPHER N. PATTERSON  
Circuit Judge

BOOK 1014 PAGE 507

Exhibit B

**IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT  
IN AND FOR HOLMES COUNTY, FLORIDA**

**BOOK 1014 PAGE 508**

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

vs

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

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

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

**PRE-TRIAL CATALOGUE**

**COMES NOW**, the Petitioner/Respondent (circle one), \_\_\_\_\_, and files this Pre-Trial Catalogue:

**THE MARRIAGE:**

1. Date and place of Marriage
2. Date of separation

**THE CHILDREN:**

1. Names and ages of the children involved, if any
2. What timesharing arrangement has been in effect since filing of the petition
3. The amount of child support proposed for the children
4. Whether or not the children are presently covered under any medical insurance policy
5. What, if any, special medical problems any of the children may have
6. A suggested timesharing schedule for the non-custodial parent
7. A proposed parenting plan

**ALIMONY:**

1. Amount of alimony, if any, requested by each party
2. Nature of the alimony: permanent, rehabilitative, lump sum, or a combination of same

**PERSONAL PROPERTY:**

1. A list of all personal property in controversy
2. Suggested disposition of said property
3. The value of each piece of property showing any lien or obligation against said property, and who is obligated for payment.
4. Life insurance policies, if any, and whether said policies are term or whole
5. List of any non-marital property

**REAL PROPERTY:**

1. A list of all real property in controversy
2. The value of each parcel of property showing any lien or obligation against said property, and who is obligated for payment.
3. What interests, right of claim or equitable interest each party claims in each parcel of property

Exhibit B

**BOOK 1014 PAGE 509**

4. Suggested disposition of the property

**RETIREMENT PLANS:**

1. A list of all retirement plans, pensions, profit sharing, annuity, deferred compensation and/or insurance plans whether they are vested or non-vested

**DEBTS:**

1. A list of all unsecured debts
2. A list of all secured debts, including the security for payment of the debt
3. Suggested disposition of the debts

**ATTORNEY'S FEES AND COURT COSTS:**

1. The amount of attorney's fees and court costs sought by either party from the other (estimate to conclusion of trial)

**MISCELLANEOUS:**

1. List of admissions and stipulations to avoid unnecessary proof
2. List of ending motions
3. Request for judicial notice
4. Estimate of time needed for trial (the parties will be expected to complete the trial within the time allotted, which the Court will equitably allocate between the parties)

**ATTACH THE FOLLOWING TO THE PRE-TRIAL CATALOGUE:**

1. Fully executed Financial Affidavit
2. Child Support Guideline Worksheet
3. Certificate of Completion of approved Parent Education and Stabilization Course
4. Proposed chart of equitable distribution
5. Copies of all photographs, exhibits and documentary evidence which the party proposed to use at trial.
6. A witness list which provides all names, addresses and telephone numbers of the witnesses

I certify that a copy of this Pre-Trial Catalogue was [☒ **one** only] ( ) mailed ( ) faxed and mailed ( ) hand delivered ( ) e-served to the person listed below on (date) \_\_\_\_\_.

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

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Fax Number: \_\_\_\_\_