

FILING MOTION FOR CREDIT FOR DIRECT CHILD SUPPORT PAYMENTS

Please follow the steps below to ensure that you file correctly:

FIRST:

- a. - Complete the **Motion for Credit for Direct Child Support Payments** and the **Affidavit Regarding Direct Child Support Payments**. The petitioner in the Child Support case will also be the petitioner in the Motion and you will use the same Case Number.
- b. - Sign the **Motion** in front of a Notary Public.
- c. - Fill out the **Order Granting Motion for Credit** with the names, case number and addresses only. The judge's office will fill out the rest.
- d. - The petitioner should also fill out and file the **Notice that Case is at Issue** by following the instructions entitled Requesting a Hearing in a Family Court Case in Alachua County, Florida.

SECOND:

Make **2*** complete copies of all of your paperwork (including evidence). Do not copy the instruction sheets.

ONE is for **YOU**.

ONE is for the **OTHER PARTY**.

THIRD:

Take your **ORIGINAL** documents (without instruction sheets) to the **CLERK OF THE COURT, Civil Division, Alachua County Courthouse (First Floor)** and tell them you want to **FILE** a motion.

You may also submit documents by mail to **Alachua County Clerk of the Court, Civil Division, P.O. Box 600, Gainesville, FL 32602**. You may reach the Clerk of Court by phone at (352) 374-3636.

Remember: Originals must always be filed in your Court file. When you file an original document, you should keep a copy for your records and certify in writing that you either mailed or hand-delivered a copy to the other party.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE FAMILY COURT CASE MANAGEMENT PROGRAM AT (352) 374-3694.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

CASE NO. _____
DIVISION _____

Petitioner,

and

Respondent.

MOTION FOR CREDIT FOR DIRECT CHILD SUPPORT PAYMENTS

Petitioner Respondent requests that the Court enter an order for credit for direct child support payments in favor of the Obligor who is the Petitioner Respondent and provides the following reasons as grounds:

1. A final judgment or order titled _____
{title of final judgment or order}
in this case was entered on _____, by _____
{date} {court, city, and state}

 Check here if the judgment or order is not from this Court and attach a copy.

2. This order of the Court required that child support payments be made directly to the Clerk of Court for disbursement to the Obligee.

3. Pursuant to the attached Affidavit, the Obligor, made payments totaling \$ _____
directly to the Obligee.

WHEREFORE, the Petitioner Respondent respectfully request that the Court enter an order directing the Clerk of Court, Domestic Relations Division to credit the above referenced support record in the amount of \$ _____

I certify that a copy of this document was [one only] mailed faxed and mailed hand delivered to the person(s) listed below on {date}.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made above 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: _____

STATE OF FLORIDA

COUNTY OF _____

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

_____ who is personally known OR

produced identification _____

NOTARY PUBLIC—STATE OF FLORIDA

This form was completed with the assistance of:

(Name of Individual)

(Name of Business)

(Address)

(Telephone Number)

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT,
IN AND FOR ALACHUA COUNTY, FLORIDA

CASE NO. _____
DIVISION _____

Petitioner,

and

Respondent.

AFFIDAVIT REGARDING DIRECT CHILD SUPPORT PAYMENTS

I, _____, the Obligor Oblige, under penalty of perjury, do hereby swear and/or affirm that I:

_____ received
_____ paid direct

the following payments on the dates indicated:

PAYMENT DATE	PAYMENT AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(you may need to add an attachment if you need more space than provided above)

The total amount:
_____ received (as evidenced by copies of cancelled checks or receipts)
_____ paid (as evidenced by copies of cancelled checks or receipts)

through direct payment is \$ _____.

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

Dated: _____

Signature

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____
_____ who is personally known OR
produced identification _____.

NOTARY PUBLIC—STATE OF FLORIDA

This form was completed with the assistance of:

(Name of Individual)

(Name of Business)

(Address)

(Telephone Number)

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT,
IN AND FOR ALACHUA COUNTY, FLORIDA

CASE NO. _____
DIVISION _____

Petitioner,

and

Respondent.

ORDER GRANTING MOTION FOR CREDIT

THIS CAUSE, having come on for hearing on _____, 20 ____,
on the Motion for Credit for Direct Child Support Payments and the court having considered all of the
evidence presented and being fully advised in the premises,

IT IS HEREBY ADJUDGED that,

1. The Clerk of Court, Domestic Relations Department, _____ County, Florida, is hereby directed
to credit the above referenced child support record in the amount of
\$ _____ for payments made directly to the Obligee.

2. Unless otherwise directed by the Court, the Obligor shall make all future court ordered payments to the Domestic Relations Department of the Office of the Clerk of the Circuit Court, _____ County

Mailing address of clerk's office

ORDERED this _____ day of _____, 20____, nunc pro tunc, _____, 20_____

CIRCUIT JUDGE

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing *Order Granting Motion for Credit* was furnished by U.S. Mail to :

Obligor
Name _____
Address _____

Obligee
Name _____
Address _____

Hand Delivery to:

The Domestic Relations Department of Clerk of the Circuit Court

on this _____ day of _____, 20_____.

Judicial Assistant

Requesting a Hearing in a Family Court Case in Alachua County, Florida*

DO NOT FILE the (next 2 pages)

*NOTICE THAT ACTION IS AT ISSUE AND MOTION FOR HEARING/NON-JURY TRIAL

Until:

1. You have filed Proof of Service of Process Or Publication
2. AND Clerk has entered default Or Respondent has filed Answer
3. AND Mediation (352) 491-4417 has been completed.

You will use the combined form of Notice that Action is at Issue and Motion for Hearing/Non-Jury Trial and Order Setting Date for Non-Jury Trial to request that the judge set a hearing on your motion or petition.

Fill out the top portion of page one with the following information:

- Parties' names (Petitioner and Respondent)
- Case number and Division
- Your name (Comes Now _____)
- Amount of time you think will be required for the judge to hear all the issues in your motion or petition. If your case has no disputed issues, it may take only ten minutes.
- Today's date
- Your signature (no Notary needed)

Do not fill out page one below the dotted line.

Fill out the second page with the following information only:

- Your name and address
- The Respondent's name and address

Make 2 copies of both pages and prepare 2 stamped envelopes:

- Mail or hand-deliver one copy to the Respondent.
- Mail or hand-deliver one copy to the Case Manager in Room 400 (Family Courts) in the Alachua County Courthouse along with 2 stamped business size envelopes, one addressed to you and the other addressed to the Respondent. You may submit these items by mail to the Case Manager at Alachua County Courthouse, 201 E. University Avenue, Room 400, Gainesville, FL 32601.

File the original signed document (both pages) with the Clerk of Court

The Clerk of Court, Civil Division is located on the right side of the first floor of the Alachua County Courthouse. You may also mail it to the Clerk at P. O. Box 600, Gainesville, FL 32602.

In about three weeks, you should receive a response from the judge's office. If a month passes and you do not receive a response, you may call Family Courts at (352) 374-3694 to ask about the status of your request for a court hearing.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA

CASE NO. _____
DIVISION _____

Petitioner,

and

Respondent.
_____ /

NOTICE THAT ACTION IS AT ISSUE AND MOTION FOR HEARING/NON-JURY TRIAL

COMES NOW _____, pursuant to Fla.Fam.Law R.P. 12.440, and
(Your Name)
shows that this action is at issue and ready for a hearing/non-jury trial. The hearing/trial is on the original action. It is estimated that the trial will require _____ minutes. Therefore,
(amount of time)
the undersigned requests the court schedule a hearing/non-jury trial in this action.

Dated: _____
(today's date)

YOUR SIGNATURE

(Do NOT cut)

ORDER SETTING DATE FOR HEARING/NON-JURY TRIAL
(Fla.Fam.Law R.P. 12.440)

THIS ACTION is at issue and is ready to be set for trial. Therefore it is
ADJUDGED that this action is set for Hearing/Non-Jury Trial on _____, 20____,
at _____ a.m./p.m. (_____ minutes being reserved), in the Chambers of the undersigned judge, at the Alachua County Courthouse, Gainesville, Florida.

ORDERED on this _____ day of _____, 20_____ .

CIRCUIT JUDGE

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Order Setting Date for Hearing/Non-Jury Trial has been furnished by U.S. Mail or hand delivery this _____ day of _____, 20_____, to:

(Print the petitioner's name and address below)

(Print the respondent's name and address below)

Judicial Assistant

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the Office of the Clerk of Court at the county courthouse where this hearing is to be held within 2 working days of your receipt of this notice; if you are hearing or voice impaired, call 1-800-955-8778.