### PACKET 10

Forms Associated with Florida Supreme Court Forms for Filing a

### Petition for Name Change of an Adult



#### **EIGHTH JUDICIAL CIRCUIT**

#### THINGS TO DO AFTER FORMS ARE COMPLETE:

- Make a copy for your records
- File the original documents with the Clerk's Office on the 1st floor of the civil courthouse OR
- E-file the documents on the eportal at www.myflcourtaccess.com
- Optional: prior to filing, you may take the COMPLETED forms to FAMILY COURT CASE MANAGEMENT on the 4th floor for review

#### **FEES**

Filing fee.............. \$400.00 Notary Fee........... \$5.00 per notary signature Summons ............. \$10.00 to issue Copies by clerk .... \$1.00 per page Self-serve copies ...... \$0.15 using copy machine in the Official Records area Fees paid to Sheriff for service of process are separate

#### **PAYMENT OPTIONS**

The Clerk accepts payments in cash, personal check, cashier's check and money order payable to Clerk of Court. The Clerk also accepts Visa and MasterCard, which requires an additional 3.5% processing fee.

| Revised June 20, 2024                | 22 pages |
|--------------------------------------|----------|
| For FSC Forms Revised February 2023  | \$3.30   |
| For Circuit Forms Revised March 2021 |          |

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#### **WARNING**

IF THERE IS ANY QUESTION in your mind concerning these forms, the use of these forms, or your legal rights, it is strongly recommended that you obtain the services of an attorney. If you do not know an attorney, you may contact the Florida Lawyer Referral Service at 1-800-342-8011. If you are filing for divorce in a case involving domestic violence and are financially unable to afford the services of an attorney, you may contact Three Rivers Legal Services at (352) 372-0519 or 1-800-372-0936 to see if you are eligible for their services.

DUE TO THE CHANGING NATURE OF THE LAW, the forms and information contained in this packet may become outdated. Therefore, you should review and research statutes and rules of procedure referenced in the instructions to ensure that the forms are accurate and current.

IN NO EVENT will the Florida Supreme Court, the Florida Bar, the Eighth Judicial Circuit Office of the Court Administrator, the Clerk of the Court or anyone contributing to the production of these forms, commentary, instructions, and appendices be liable for any indirect or consequential damages resulting from the use of the packet.

Use these forms at your own risk. These forms may or may not be appropriate in your particular case. Any desired outcome from the use of these forms cannot be predicted or guaranteed. It is strongly recommended that you seek legal advice.

When the forms refer to: "General Information for Self-Represented Litigants)," the information is found at <a href="http://www.flcourts.org">http://www.flcourts.org</a> (select Family Forms located under the heading Self Help in the General Public Tab).



#### EIGHTH JUDICIAL CIRCUIT

# Resources for Litigants Filing a Family Law Action Without Legal Counsel

Information on how to file family law cases without an attorney in the State of Florida can be found at:

http://circuit8.org/family-court or http://www.flcourts.org (select Family Forms located under the heading Self Help in the General Public Tab)

Internet access and procedural guidance is available at the Self Help Center, Room 413, of the Family/Civil Justice Center.

Another helpful resource:

Southern Legal Counsel (352)271-8890

https://www.southernlegal.org/www-southernlegal-org

# FAMILY COURT SELF HELP CENTER

#### **EIGHTH JUDICIAL CIRCUIT**



# SERVING ALACHUA COUNTY A PROGRAM OF THE ADMINISTRATIVE OFFICE OF THE COURT

The Self Help Center staff is employed by the Court to assist the Family Law Judges by making sure that all cases in which the petitioner is not represented by an attorney have met procedural requirements.

As in all matters involving law, it is recommended that you obtain the services of a competent lawyer. It is important for you to understand that the Court and Program staff do not represent you. **YOU** represent yourself.

If you decide to proceed without a lawyer, the Self Help Center staff will:

- > explain procedures
- > guide you on informative and helpful websites
- > inform you about additional court requirements
- > help you set a hearing with the judge

#### The staff will not:

- > give legal advice or explain rights
- > represent you in court
- > tell you what forms to file
- > tell you how to present your case
- > notify you that your case is ready to file

#### **PROCEDURES**

If you have decided to file a family law case without a lawyer, please follow these steps:

1. Purchase the applicable form and/or packet from the Clerk of the Court or download the forms from the Clerk's website at <a href="https://www.alachuaclerk.org">www.alachuaclerk.org</a>.

- 2. Complete the packet of forms in ink or typed. Court staff cannot assist you in completing the forms.
- Instructions regarding filing and procedures are addressed in the packet. Procedural
  questions can be answered by calling (352)548-3781 or visiting the Self Help Center,
  Alachua County Family/Civil Justice Center, 201 E. University Avenue, Room 413,
  Gainesville, Florida 32601.
- 4. Further instructions regarding procedures after filing are addressed in the packet. Your case will be monitored for procedural requirements by the Self Help Center staff.

<u>Helpful websites</u> -- information on how to file family law cases without an attorney in the State of Florida can be found at:

#### **Eighth Judicial Circuit Website:**

http://circuit8.org/services/familycourt or

#### Florida Supreme Court Website:

http://www.flcourts.org (select Family Forms located under the heading Self Help in the General Public Tab)





# EIGHTH JUDICIAL CIRCUIT FAMILY COURT SELF HELP CENTER

#### NOTICE OF LIMITATION OF SERVICES PROVIDED/DISCLAIMER

The personnel in the office of the Clerk of the Court are not acting as your lawyer or providing legal advice to you.

Clerk of Court 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 the office of the Clerk of the Court cannot tell you what your legal rights or remedies are, represent you in court, give legal advice or instructions on completing forms or tell you how to testify in court.

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 benefits, assets, or liabilities.

| <br>I can read English (Go to    | signature line)              |
|----------------------------------|------------------------------|
| <br>I cannot read English, but t | his notice was read to me by |
|                                  | in                           |
| (Name)                           | (Language)                   |
|                                  |                              |
| -                                |                              |
| YOU                              | R SIGNATURE                  |

#### **CHECKLIST NAME CHANGE**

| ADUL   | T:  |  |  |
|--------|---|--|--|
|        | CIVIL COVER SHEET   |  |  |
|        | NOTICE OF LIMITED SERVICE/ DISCLAIMER                                 |  |  |
|        | PETITION  |  |  |
|        | CRIMINAL HISTORY RECORD ( NOT NEEDED IF CHANGING BACK TO MAIDEN NAME) |  |  |
| MINO   | R CHILD:  |  |  |
|        | CIVIL COVER SHEET   |  |  |
|        | NOTICE OF LIMITED SERVICES/DISCLAIMER                                 |  |  |
|        | PETITION/JOINT PETITION   |  |  |
|        | SUPPLEMENTAL FORM FOR PETITION ( IF MORE THAN ONE CHILD)              |  |  |
|        | CONSENT (OTHER PARTY). Power of attorney is not a consent.            |  |  |
|        | CRIMINAL HISTORY RECORD   |  |  |
| OR (IF | NO CONSENT)   |  |  |
|        | PROOF OF SERVICE (PERSONAL)   |  |  |
|        | AFFIDAVIT OF PERSONAL SERVICE OUT OF STATE                            |  |  |
|        | PROOF OF SERVICE ( CONSTRUCTIVE)                                      |  |  |
|        | □ NOTICE OF ACTION  |  |  |
|        | ☐ AFFIDAVIT OF DILIGENT SEARCH  |  |  |
|        | □ PROOF OF PUBLICATION or   |  |  |
|        | □ PROOF OF POSTING  |  |  |
|        | □ NONMILITARY AFFIDAVIT   |  |  |
|        | ☐ MEMO FOR CERTIFICATE OF MILITARY SERVICE                            |  |  |
|        | MOTION FOR DEFAULT  |  |  |

<sup>\*\*\*</sup> This checklist is not intended as legal advice; it is a list of what the court still needs in order to go forward with your case. You must provide the information that is listed above before your next court hearing.

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

| Petitioner                            | and                 | ,<br>Case No                      | ):  |
|---------------------------------------|---------------------|-----------------------------------|---|
|                                       |                     | , Division                        | :   |
| Respondent                            |                     | ,                                 |   |
| DESIGNAT                              | TION OF CURRENT N   | MAILING AND E-MAIL AD             | DDRESS [FORM 12.915]  |
| l,                                    |                     |                                   |   |
| My current mailing add                |                     | AILING ADDRESS:                   |   |
| •                                     |                     |                                   |   |
|                                       |                     |                                   |   |
|                                       |                     |                                   | , {Zip}   |
| {Telephone No.}                       |                     | {Fax No.}                         | <del>,</del>  |
|                                       |                     | E-MAIL ADDRESS:                   |   |
| The following is/are                  | my e-mail address(  | es) for purposes of serv          | ing and receiving documents:  |
| Primary e-mail addre                  | ess:                |                                   |   |
| Secondary e-mail ad                   | dress No.1:         |                                   |   |
| Secondary e-mail ad                   | dress No.2:         |                                   |   |
|                                       | and e-mail address( | (es) and that all future          | ing party or parties notified of papers in this lawsuit will be                       |
| I certify that a copy of delivered on |                     | as [ <b>check all used</b> ] □e-r | mailed, □mailed, □ hand   |
| (insert name                          | (s) and address(es) |                                   |   |
| CORRECT. I UNDERSTA                   | AND THAT THE STATE  |                                   | D EACH STATEMENT IS TRUE AND<br>OCUMENT ARE BEING MADE UNDER<br>02, FLORIDA STATUTES. |
| Signature:                            |                     |                                   |   |
| Printed Name:                         |                     |                                   |   |
| Address:                              |                     |                                   |   |
| E-mail address:                       |                     |                                   |   |
| Phone number:                         |                     |                                   |   |

| Your transaction cont | ol number is TCN# <sup>·</sup> | 70SX |
|-----------------------|--------------------------------|------|
|                       |                                |      |

#### FINGERPRINT INFORMATION

#### FOR NAME CHANGE PETITIONERS

Before the court hears a name change petition, each adult petitioner (unless a former name is being restored) must have fingerprints submitted for a state and national criminal history records check, F.S. 68.07, which must be submitted electronically. The cost must be borne by the name change petitioner.

To get your fingerprints submitted electronically:

 Visit the Alachua County Sheriff's Office 2621 SE Hawthorne Road Gainesville, FL 32641 (352) 367-4000

Fingerprinting hours are Monday through Friday, 7 a.m. to 7 p.m.

- 2. Bring this information sheet with you to the Alachua County Sheriff's Office.
- 3. Bring your picture ID—a Florida driver's license is preferred. You will not be able to submit your fingerprints without a picture ID.
- 4. The Sheriff's Office will use the Originating Agency Identification (ORI) Number FL923520Z to insure that FDLE returns the electronic report to the Alachua County Clerk's Office.
- 5. Bring cash (small bills), cashiers or certified check, or money order for the \$10 Sheriff's fee.
- 6. The Sheriff's Office will record the transaction control number (TCN) on this form to be used in the payment process in number 7. Keep this for your records.
- 7. The FDLE payment of \$37.25 (\$24.00 FDLE and \$13.25 FBI) must be made online at <a href="https://caps.fdle.state.fl.us/caps/homePage.jsf">https://caps.fdle.state.fl.us/caps/homePage.jsf</a> by credit card after your fingerprints are taken.

At the website, click on information.

Begin Payment Process

and enter the requested

- a. The TRANSACTION CONTROL NUMBER (TCN), which is at the top of this information sheet.
- b. Enter your name exactly as provided in the livescan submission, in ALL caps: FIRST name, then optional MIDDLE name, and then LAST name, and then the optional SUFFIX, JR, SR, I, II, III etc.
- c. Enter your credit card and personal information.
- d. Submit the payment transaction.
- e. Print the confirmation of the payment and keep it for your records if needed.
- 8. The agencies conducting the fingerprint checks will send the results directly to the Alachua County Clerk of Court. **DO NOT FILE YOUR FINGERPRINT CARD**.
- 9. If you have questions about the electronic fingerprint submission, you may contact FDLE's E-Government Criminal History Services Section at (850) 410-8161.

|   | Cover Sheet for F   | amily Court Cases  |
|---|---|--|
| <b>I.</b> C                                   | ase Style   |  |
|   |   | HE EIGHTH JUDICIAL CIRCUIT   |
|   | IN AND FOR ALACHU   | IA COUNTY, FLORIDA   |
|   | Petitioner  |  |
|   | and   | Case No.:  |
|   |   |  |
|   | Respondent  |  |
| m<br>th                                       | nore than one type of proceeding (such as a m   | e the proceeding you are initiating. If you are filing odification and an enforcement proceeding) against st complete a separate cover sheet for each action one of the three options below it.  |
| (/  | A) X Initial Action/Petition  |  |
| (E  | B) Reopening Case   |  |
|   | 1 Modification/Supplemental Petition  |  |
|   | <ol> <li>Motion for Civil Contempt/Enforcen</li> <li>Other</li> </ol>   | ient   |
|   | 3. <u> </u>   |  |
| (L)<br>(L)<br>(L)<br>(L)<br>(L)<br>(L)<br>(L) | Type of Case. If the case fits more than one type  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) Support for Dependent Adult Children—all matters related to support of a dependent adult child. | (L) UIFSA Non-IV-D (not Department of Revenue, Child Support Enforcement)  (M) Other Family Court  (N) Adoption Arising Out of Chapter 63  (O) _X Name Change  (P) Paternity/Disestablishment of Paternity  (Q) Juvenile Delinquency  (R) Petition for Dependency  (S) Shelter Petition  (T) Termination of Parental Rights Arising Out of Chapter 39  (U) Adoption Arising Out of Chapter 39  (V) CINS/FINS  (W) Petition for Temporary or Concurrent Custody by Extended Family  (X) Emancipation of a Minor |
| Famil<br>Iitigar                              | ly Law Form 12.900(h), be filed with the initial pl   | 2.545(d) requires that a Notice of Related Cases Form, eading/petition by the filing attorney or self-represented. Is Form 12.900(h) being filed with this Cover Sheet for   |
|   | No, to the best of my knowledge, no related cas<br>Yes, all related cases are listed on Family Law Fo   |  |

#### **ATTORNEY OR PARTY SIGNATURE**

| Signatu  | re                                     | FL Bar No.:                                 |  |  |
|--|--|---|--|--|
|  | Attorney or party                      | (Bar number, if attorney)                   |  |  |
|  | (Type or print name)                   | Date  |  |  |
| IF A NO  | NLAWYER HELPED YOU FILL OUT THIS       | FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: |  |  |
| [fill in <b>a</b>  | ll blanks]                             |   |  |  |
| This for   | m was prepared for the: {choose only o | · · · · · · · · · · · · · · · · · · ·       |  |  |
|  | m was completed with the assistance of | of:   |  |  |
| This for   | ·                                      | of:   |  |  |
| This for   | of individual}                         |   |  |  |
| This for {name of the formula of the | of individual}<br>of business}         |   |  |  |

### INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.982(a), PETITION FOR CHANGE OF NAME (ADULT) (02/18)

#### When should this form be used?

This form should be used when an adult wants the court to change his or her name. This form is **not** to be used in connection with a dissolution of marriage or for adoption of child(ren). If you want a change of name because of a <u>dissolution of marriage</u> or adoption of child(ren) that is not yet final, the change of name should be requested as part of that case.

This form should be typed or printed in black ink and must be signed before a <u>notary public</u> or <u>deputy</u> <u>clerk.</u> You should <u>file</u> the original with the <u>clerk of the circuit court</u> in the county where you live and keep a copy for your records

#### What should I do next?

Unless you are seeking to restore a former name, you must have fingerprints submitted for a state and national criminal records check. The fingerprints must be taken in a manner approved by the Department of Law Enforcement and must be submitted to the Department for a state and national criminal records check. You may not request a hearing on the petition until the clerk of court has received the results of your criminal history records check. The clerk of court can instruct you on the process for having the fingerprints taken and submitted, including information on law enforcement agencies or service providers authorized to submit fingerprints electronically to the Department of Law Enforcement. The process may take several weeks and you will have to pay for the cost of processing the fingerprints and conducting the state and national criminal history records check. Please note that the state and national criminal records check must indicate whether you have registered as a sexual predator or a sexual offender and you must also indicate on this petition whether you have ever been required to register as a sexual predator under section 775.21, Florida Statutes, or as a sexual offender under section 943.0435, F.S.

Next, you must obtain a <a href="https://example.com/hearing">hearing</a> date for the court to consider your request. If you are seeking to restore a former name, a hearing on the petition MAY be held immediately after the petition is filed. The final hearing on any other petition for a name change may be held immediately after the clerk of court receives the results of your criminal history records check. You should ask the clerk of court, <a href="family law intake staff">family law intake staff</a>, or <a href="judicial assistant">judicial assistant</a> about the local procedure for setting a hearing. You may be required to attend the <a href="final hearing">final hearing</a>. Included in these forms is a <a href="final Judgment">Final Judgment</a> of <a href="Mame">Name</a> (Adult)</a>, Florida Supreme Court Approved Family Law Form 12.982(b), which the <a href="judge">judge</a> may use. You should contact the clerk, family law intake staff, or judicial assistant, to see if you need to bring a <a href="final judgment">final judgment</a> form with you. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

If the judge grants your **petition**, he or she will sign this **order**. This officially changes your name. The clerk can provide you with **certified copies** of the signed order. There will be charges for the certified copies, and the clerk can tell you the amount of the charges.

#### 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 Section 68.07, Florida Statutes.

#### 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

Instructions for Florida Family Law Rules of Procedure Form 12.982(a), Petition for Change of Name (Adult) (02/18)

your pleadings or other documents electronically, you must do so in accordance with Florida Rule of General Practice and 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 General Practice and Judicial Administration 2.516. You may find this rule at 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 General Practice and Judicial Administration 2.516.

#### Special notes...

The heading of the form calls for the name of the **petitioner**. Your current name should go there, as you are the one who is asking the court for something. The judicial circuit, case number, and division may be obtained from the clerk of court's office when you file the petition.

It may be helpful to compile a list of all of the people and/or places that will need a copy of your final judgment. This list may include the driver's license office, social security office, banks, schools, etc. A list will help you know how many copies of your order you should get from the clerk of court after your hearing.

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 EIGHTH JUDICIAL CIRCUIT IN AND FOR ALACHUA COUNTY, FLORIDA

| IN RE: THE NAME CHANGE OF   |                        |  |              |
|---|------------------------|--|--------------|
|   |                        | Case No.:                                      |              |
|   |                        | Division:                                      |              |
| Petitioner.   | <del></del>            |  |              |
| PETITI  | ON FOR CHANGE OF       | NAME (ADULT)                                   |              |
| I, {full legal name}  |                        | , being sworn, cert                            | ify that the |
| following information is true:  |                        |  |              |
| <ol> <li>My complete present name is:</li> <li>I request that my name be change</li> </ol>                        | ed to:                 |  |              |
| 2. I live inCour  |                        | address}                                       |              |
| 3. I was born on {date}<br>{state}  | , in {city}, {country} | , {county}                                     |              |
| b   | aiden name(s) is/are:  |  |              |
|   | ess                    | acts on an attached page                       |              |
| 6. Family [Indicate all that apply] a. I am not married b. I am married. My spouse's c. I do not have child(ren). | full legal name is:    | ren) are as follows (all children, <b>incl</b> |              |
| Name {last, first, middle initial}  | Age                    | Address, City, State                           |              |
|   |                        |  |              |
|   |                        |  |              |
|   |                        |  |              |

| (            | Please indic   | ate here if you a | are continuing these fa   | cts on an attached page.)                  |
|--------------|--|-------------------|---------------------------|--|
| 7. <b>Fo</b> | rmer names   |                   |                           |  |
| [Indica      | ate <b>all</b> that apply]   |                   |                           |  |
| ا            | My name has neve   | er been changed   | d <b>by a court</b> .     |  |
|              |  |                   |                           |  |
| 1            | to   |                   |                           | on {date}                                  |
|              |  |                   |                           |  |
| 1            | A copy of the cou  | rt order is attac | cnea.                     |  |
| !            | My name previous   | sly was changed   | d <b>by marriage</b> from |  |
| 1            | to   |                   |                           | on {date}                                  |
| İ            | in {city, county, an   | d state}          |                           |  |
| 4            | A copy of the mar  | riage certificate | e is attached.            |  |
|              | I have been know   | n or called by t  |                           | me(s): {list name(s) and explain where you |
| M            | ccupation y occupation is:   |                   |                           |  |
| ıa           | iii eiiipioyed at. {t  | ompuny ana ad     | uuress <sub>f</sub>       |  |
|              | / / / / / / / / / / / / / / / / / / /  | Employ            |                           |  |
| 9. <b>Bu</b> | ısiness  |                   |                           |  |
| [Choos       | se <b>one</b> only]  |                   |                           |  |
|              | I do not own and o   | •                 |                           |  |
|              |  |                   |                           | is:  |
|              | The street address   | ; is:             |                           |  |
|              | My position with t   | he business is:   |                           |  |
|              | i nave been involv   | ed with the bus   | siness since: {aate}      |  |
| [Choos       | ofession se one only] I am not in a pro I am in a profess ave practiced this | sion. My profess  | sion is:                  |  |
|              | ates (to/from)   | •                 | and address               |  |
| Da           | , ,  |                   |                           |  |
|              |  |                   |                           |  |
| _            |  |                   |                           |  |
|              |  |                   |                           |  |
|              | <u> </u>   |                   |                           |  |

| Pkt 10                                |                           | Pg 17   |
|---------------------------------------|---------------------------|---|
| () Please indicate                    | here if you are continu   | uing these facts on an attached page.)  |
| 11. Education                         |                           |   |
| I have graduated fro                  | m the following school    | (s):  |
| Degree Received                       | Date of Graduation        | School  |
| ( ) Please indicate I                 | here if you are continui  | ing these facts on an attached page.)   |
| <del></del>                           | ·                         |   |
|                                       | arrested for or charged   | I with, pled guilty or nolo contendere to, or been found to   |
| I have a criminal h                   | been found to have con    | ve been arrested for or charged with, pled guilty or nolo nmitted a criminal offense, regardless of adjudication. The |
| ·                                     | City/State                | Event (arrest, charge, plea, or adjudication)   |
|                                       |                           |   |
|                                       |                           |   |
| () Please indicat                     | e here if you are contir  | nuing these facts on an attached page.)   |
| I haveha<br>Florida Statutes.         | ve not ever been requi    | red to register as a sexual predator under section 775.21,  |
| I have<br>943.0435, Florida Sta       |                           | required to register as a sexual offender under section   |
| 13. Bankruptcy                        |                           |   |
| [Choose <b>one</b> only]              |                           |   |
| I have never been                     |                           | in (city)   |
| {county}                              | , {state}                 | , in {city}   |
| ()Please indicate h                   | nere if you have filed ac | Iditional bankruptcies, and explain on an attached page.)   |
| 14. Creditor(s)' Judgmen              | nts                       |   |
| [Choose <b>one</b> only]              | la manayiydamantan        | torod against ma bu a graditar  |
| · · · · · · · · · · · · · · · · · · · |                           | tered against me by a creditor. lent(s) have been entered against me:   |
| Date Amount                           | Creditor                  | Court entering judgment and case number If Paid   |
|                                       |                           |   |
|                                       |                           |   |
|                                       | _                         |   |
| () Please indicat                     | te here if these facts ar | e continued on an attached page.)   |

#### 15. Fingerprints and Criminal History Records Check

Unless I am seeking to restore a former name, a copy of my fingerprints has been taken in a manner approved by the Department of Law Enforcement and submitted for a state and national criminal

history records check. I understand that I cannot request a hearing on my Petition until the Clerk of Court receives the results of the criminal history records check. I also understand that the state and national records check must indicate whether I have registered as either a sexual predator or sexual offender.

- 16. I have no ulterior or illegal purpose for filing this petition, and granting it will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise.
- 17. My civil rights have never been suspended, or, if my civil rights have been suspended, they have been fully restored.

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 Petitioner  |
|  | Printed Name:  |
|  | Address:   |
|  | City, State, Zip:  |
|  | Telephone 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  |
|  | NOTART FOBLIC OF DEPOTT CLERK  |
|  | [Print, type, or stamp commissioned name of notary of deputy clerk.] |
| Personally known                                   |  |
| Produced identification                            |  |
| Type of identification produced                    |  |
| IF A NONLAWYER HELPED YOU FILL OUT THIS I          | FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:                          |
| [fill in all blanks] This form was prepared by the |  |
| This form was completed with the assistance of     | <del>f</del> :   |
| {name of individual}                               | <i></i>  |
| {name of business}                                 |  |
| {address}  |  |
| {city} {state} { zin code                          | e} {telenhone number}  |

# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.900(h), NOTICE OF RELATED CASES (02/24)

#### When should this form be used?

Florida Rule of General Practice and 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 judge, 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 General Practice and 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 and underline" in these instructions are defined there. For further information, see Florida Rule of General Practice and 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 EIGHTH JUDICIAL CIRCUIT IN AND FOR ALACHUA COUNTY, FLORIDA

| by be an open or closed civil, criminal, guardianship dependency, or domestic relations case. A case is y of the same parties, children, or issues and it is if it affects the court's jurisdiction to proceed; if ar  |
|--|
| Division:  |
| s required by Florida Rule of General Practice and by be an open or closed civil, criminal, guardianship dependency, or domestic relations case. A case is y of the same parties, children, or issues and it is if it affects the court's jurisdiction to proceed; if are on the same issues in the new case; or if an order |
| s required by Florida Rule of General Practice and by be an open or closed civil, criminal, guardianship, dependency, or domestic relations case. A case is y of the same parties, children, or issues and it is if it affects the court's jurisdiction to proceed; if an order  |
| s required by Florida Rule of General Practice and by be an open or closed civil, criminal, guardianship, dependency, or domestic relations case. A case is y of the same parties, children, or issues and it is if it affects the court's jurisdiction to proceed; if an order  |
| by be an open or closed civil, criminal, guardianship, dependency, or domestic relations case. A case is y of the same parties, children, or issues and it is if it affects the court's jurisdiction to proceed; if an order on the same issues in the new case; or if an order  |
| itional pages if necessary):   |
|  |
|  |
| sion:  |
|  |
| Adoption   |
| Support for Dependent Adult Children   |
| Modification/Enforcement/Contempt  |
| Proceedings  |
| Juvenile Delinquency   |
| Criminal   |
| Mental Health  |
| Other {specify}  |
|  |

| may affect court's jurisdiction;                    |   |
|---|---|
| order in related case may conflict with an o        |   |
| order in this case may conflict with previous       | s order in related case.  |
| Statement as to the relationship of the cases:      |   |
|   |   |
|   |   |
| Related Case No. 2                                  |   |
|   |   |
| Case Name(s):Petitioner :                           |   |
| Respondent :  |   |
| Case No.: D   |   |
| Type of Proceeding: [check <b>all</b> that apply]   |   |
| Dissolution of Marriage                             | Adoption  |
| Custody   | Support for Dependent Adult Children  |
| Child Support                                       | Modification/Enforcement/Contempt   |
| Juvenile Dependency                                 | Proceedings   |
| Termination of Parental Rights                      | Juvenile Delinquency  |
| Domestic/Sexual/Dating/Repeat                       | Criminal  |
| Violence or Stalking Injunctions                    | Mental Health   |
| Paternity   |   |
| raterinty   | Other {specify}   |
| State where case was decided or is pending:         | Florida Other: {snecifu}  |
|   |   |
| Name of Court where case was decided or is pe       | nding (for example, Fifth Circuit Court, Marion   |
| County, Florida):                                   | Table 1 and |
| 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, childre         | n, or issues;   |
| may affect court's jurisdiction;                    | ,   |
| order in related case may conflict with an o        | rder in this case;  |
| order in this case may conflict with previous       |   |
|   |   |
| Statement as to the relationship of the cases:      |   |
|   |   |
|   |   |
|   |   |
| [check <b>one</b> only]                             |   |
| I do not request coordination of litigation in      | •   |
| I <b>do</b> request coordination of the following c | ases:   |
|   |   |
|   |   |

3. [check all that apply]

2.

| Assignment to one jud  |   |
|--|---|
| Coordination of existing will conserve judicia   | ng cases<br>I resources and promote an efficient determination of these cases   |
|  |   |
| 4. The Petitioner acknowleds   | ges a continuing duty to inform the court of any cases in this or any other   |
| state that could affect the  |   |
| Dated:   |   |
|  | Petitioner's Signature  |
|  | Printed Name:   |
|  | Address:  |
|  | City, State, Zip:   |
|  | Telephone Number:   |
|  | Fax Number:   |
|  | E-mail Address(es):   |
|  | CERTIFICATE OF SERVICE  |
| Sheriff's Department or a certi<br>() e-mailed, () mailed, (<br>who is the [ <b>check all that appl</b><br>administrative judge, () <i>{nc</i> | py of this Notice of Related Cases to the County ified process server for service on the Respondent, and [check all used], hand delivered, a copy to {name}, y] () judge assigned to new case, () chief judge or family law name}, a party to the related case on  Signature of Petitioner/Attorney for Petitioner Printed Name: Address: City, State, Zip: Telephone Number: Florida Bar Number: |
|  | Florida Bar Number:   |
|  | U FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: s prepared for the: {choose only one} () Petitioner () Respondent   |
| This form was completed with   | the assistance of:  |
| {name of individual}   |   |
| -  |   |
|  |   |
|  | Statel Szin codel Stelenhone numberl  |