

INSTRUCTIONS FOR PETITION TO SUPERSEDE AND OR MODIFY ADMINISTRATIVE CHILD SUPPORT ORDER

When should this form be used?

This form should be used by either parent or a non parent who has custody of a minor child to ask the court to supersede and or modify an **administrative child support order** that has previously been established in an administrative hearing pursuant to section 409.2563 Florida Statutes.

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

With this petition, you must file the following and provide a copy to the other party:

- **Notice of Related Case Form**, Florida Supreme Court Approved Family Law Form 12.900(h).
- **Notice of Social Security Number**, Florida Supreme Court Approved Family Law Form 12.902(j). Entire social security number must be provided.
- **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c).
- **Certificate of Compliance with Mandatory Disclosure**, Florida Family Law Rules of Procedure Form 12.932. (This must be filed within 45 days, if not filed with the petition, unless you and the other party have agreed not to exchange these documents.)
- **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e). (If you do not know the other party's income, you may file this worksheet after his or her financial affidavit has been filed.)
- **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d)

What should I do next?

For your case to proceed, you must **serve** the other party with a copy of your **petition** by **personal service**.

You must also **serve** Florida Department of Revenue (DOR) with a copy of your **petition** at the address that is provided on the administrative order establishing child support.

After the petition is served, the other party has 20 days to answer. Your case will then generally proceed in one of the following three ways:

DEFAULT

If after 20 days, no **answer** has been filed, you may file a **Motion for Default**, Florida Supreme Court Approved Family Law Form 12.922(a), with the clerk of court. After **Default** is entered, if you have filed all of the required papers, you MUST file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, with the clerk of court. You will receive an Order Setting Hearing.

UNCONTESTED

If the other party files an answer that agrees with everything in your petition or an answer and waiver, **and** you have complied with **mandatory disclosure** and filed all of the required papers, you MUST file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, with the clerk of court . You will receive an Order Setting Hearing.

CONTESTED

If the other party files an answer or an answer and **counterpetition**, which disagrees with or denies anything in your petition, **and** you are unable to settle the disputed issues, you may be referred to **mediation** to resolve the disputed issues. If the respondent files an answer and counterpetition, you should answer the counterpetition within 20 days using an **Answer to Counterpetition**, Florida Supreme Court Approved Family Law Form 12.983(d). Following the mediation, you should file a **Notice for Trial**, Florida Supreme Court Approved Family Law Form 12.924, after you have complied with mandatory disclosure, and filed all of the required papers. You will receive an Order Setting Hearing.

Where can I look for more information?

Before proceeding, you should read “General Information for Pro Se Litigants” found at the beginning of the Florida Family Law forms. The words that are in “**bold underline**” in these instructions are defined there. For further information, see chapter 742, Florida Statutes.

**IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH COUNTY, FLORIDA**

Case No.: _____
Division: _____

_____,
Petitioner,

and

_____,
Respondent.

**PETITION TO SUPERSEDE AND OR MODIFY
ADMINISTRATIVE CHILD SUPPORT ORDER**

Petitioner, _____, being sworn, certifies that the following statements are true:

This is an action to supersede and or modify an administrative child support order that was established pursuant to Florida Statue 409.2563(10) (c) and chapter 61.

SECTION I.

1. Petitioner is the _____ mother _____ father of the following minor child(ren):

	Name	Place of Birth	Birth date	Sex
Child:	_____	_____	_____	_____
Child:	_____	_____	_____	_____
Child:	_____	_____	_____	_____
Child:	_____	_____	_____	_____
Child:	_____	_____	_____	_____

2. Florida is the Home State of the Minor Child (ren) involved in this case.

3. Venue is proper in Palm Beach County, Florida.

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

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

6. ____ Petitioner ____ Respondent has been ordered to pay child support in a **DEPARTMENT OF REVENUE ADMINISTRATIVE PROCEEDING** for the above named child(ren) in _____ County, State of _____, case Number _____. **A copy of the administrative child support order is attached.**

7. Both parties are over the age of 18, and neither is, nor has been within a 30-day period immediately prior to this date, a person in the military service of the United States as defined by Section 521 of the Service members Civil Relief Act.

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

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

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

11. A completed **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e), is, or will be, filed.

SECTION II. REQUEST

[check **all** that apply]

1. ____ Petitioner requests that the Court enter an Order to supersede an administrative child support order without any changes.

2. ____ Petitioner requests that the Court enter an Order to supersede and modify an administrative child support order to cease all child support and close out Child support ledger for the following reasons:

____ Parties do not want child support established through the court.

____ The child(ren) needs are being provided for.

____ The parties are residing together as intact family.

____ Other

3. ____ Petitioner requests that the Court enter an Order to Supersede and award child support as determined by Florida's child support guidelines, section 61.30, Florida Statutes retroactive to: [check **one** only]
 - a. ____ the date of the filing of this petition.
 - b. ____ other: {date} _____. {Explain} _____

4. _____ Petitioner requests that the Court an Order to Supersede and award a child support amount that is more than or less than Florida’s child support guidelines. Petitioner understands that a **Motion to Deviate from Child Support Guidelines**, Florida Supreme Court Approved Family Law Form 12.943, **must** be completed before the Court will consider this request.
5. _____ Petitioner requests that medical/dental insurance coverage for the minor child(ren) be provided by:
 [check **one** only]
 a. _____ Father.
 b. _____ Mother.
6. _____ Petitioner requests that uninsured medical/dental expenses for the child(ren) be paid by:
 [check **one** only]
 a. _____ Father.
 b. _____ Mother.
 c. _____ Father and Mother each pay one-half.
 d. _____ Father and Mother each pay according to the percentages in the **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e).
7. Other Relief:

SECTION III. CERTIFICATE OF COMPLIANCE WITH FLORIDA STATUTE 409.2563 (14)

Petitioner certifies that that a copy of the foregoing petition will be served upon the Respondent and the **Department of Revenue (DOR)**, at the appropriate address by personal service.

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: _____
 Email: _____

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]

I, *{full legal name and trade name of nonlawyer}* _____,
a nonlawyer, located at *{street}* _____, *{city}* _____,
{state} _____, *{phone}* _____, helped *{name}* _____,
who is the respondent, fill out this form.