

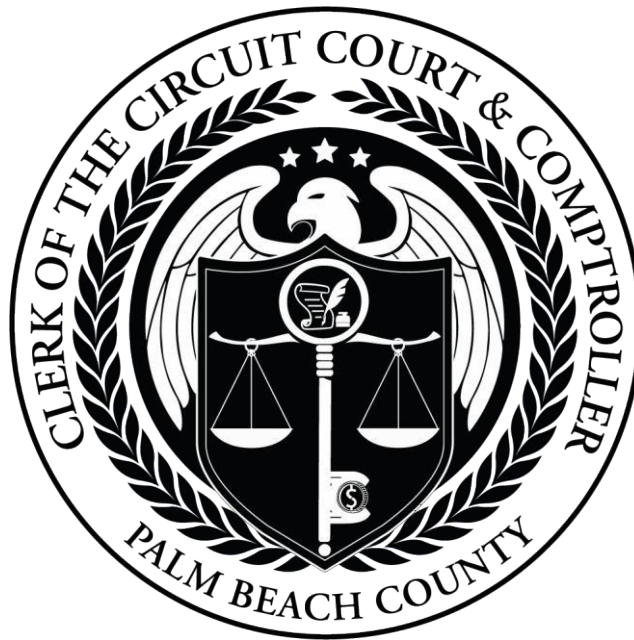
Want to learn more? Attend one of our free online Self Service Center DIY Workshops. Topic varies from month to month. Visit www.mypalmbeachclerk.com for more information.

Joseph Abruzzo

Clerk of The Circuit Court & Comptroller

Self Service Center

Your Guide Through The Courts



Packet #58

Revised 10/2022

The Baker Act

File completed forms in room:

3.22 (Main Branch)

Non-Refundable

\$4.00

Self Service Center Services

All instructions and forms distributed by the Clerk of the Circuit Court & Comptroller are provided as a public service to persons seeking to represent themselves in court without the assistance of an attorney. These documents are meant to serve as a guide only, and to assist pro se (self-represented) litigants with their cases. Any person using these instructions and/or forms does so at his or her own risk, and the Clerk shall not be responsible for any losses incurred by any person in reliance on the instructions and/or forms.

Below are a few of the services available at the Self Service Center:

(Please review current pricing as fees are subject to change without notice)

Navigator Appointments (for document preparation assistance) Free

Navigators do not provide legal advice but will assist you in completing the forms and provide you with procedural information.

Community Resource Referral- pamphlets	Free
Photocopies prior to filing	\$.15/page
Photocopies after filing	\$1.00/page
Deputy Clerk signing	\$3.50/signature
Notary signing	\$10.00/signature
Single forms	\$1.00/page

For more information, please go to www.mypalmbeachclerk.com, email us at Selfservice@mypalmbeachclerk.com, or visit one of the following locations:

Palm Beach County Courthouse
205 N. Dixie Highway, Rm #1.25
West Palm Beach, Florida 33401
Self Service line: 561-355-7048

North County Courthouse
3188 PGA Blvd
Palm Beach Gardens, Florida 33410
561-624-6650

South County Courthouse
200 W. Atlantic Ave.
Delray Beach, Florida 33444
561-274-1588

West County Courthouse
2950 State Road 15, Rm. #S-100
Belle Glade, Florida 33430
561-996-4843

Additional Legal Resources:

Florida Rural Legal Services
www.frls.org
561-820-8902

Legal Aid Society of Palm Beach County
www.legalaidpbc.org
561-655-8944

Lawyer Referral Service
www.palmbeachbar.org
561-687-3266 (to hire a lawyer to represent you in court or give you legal advice)

Palm Beach County Law Library
<https://www.15thcircuit.com/services/law-library>
561-355-2928



The Baker Act

(Packet #58)

When should this packet be used?

This Packet should be used by family members or friends who want help from the court to order an involuntarily assessment of the person because he or she might harm themselves or others. The person who you are claiming that needs help must meet the following criteria, per Florida Statute Section 394.467:

The person has refused voluntary examination.

OR

The person cannot determine for him or herself whether examination is necessary;

AND

(one of the following):

- Without care or treatment, the person cannot determine if he or she is likely to suffer from neglect or refuse to care for him or herself;
- Such neglect or refusal is a real and present threat of substantial harm to his or her well-being;
- It is not clear to the person that the harm may be avoided through the help of willing family members or friends, or with the intervention of services; **OR**
- There is high chance that, without care or treatment, he or she will cause serious bodily harm to him or herself or others in the near future as evidenced by recent behavior.

Please Note: If the respondent is a minor, the petition must be filed by a parent, legal guardian, or legal custodian.

The Baker Act is a Two-Part Process:

(See page 6 of our instructions for a Flowchart of the process)

Part One: Judicial Review

If your case meets the requirements above, you may file a Petition and Affidavit Seeking Ex Parte Order Requiring Involuntary Examination. If granted, the person who you are claiming to have a mental illness is held in a receiving facility for involuntary examination for up to 72 hours.

Part Two: Evaluation and Possible Placement

Next, based on the results of the examination, the receiving facility may file a Petition for Involuntary Inpatient Placement with the court. **This packet only provides the forms for the first part of the Baker Act Process because the second part is initiated by the mental health facility.**

Filing Fee: No fee required

✓ FORMS CHECKLIST ✓

Include in Initial Filing:

__ Cover Sheet for Family Court Cases, Form 12.928, (Pages 10-11)

__ Petition and Affidavit Seeking Ex Parte Order Requiring Involuntary Examination, MH 3002, (Pages 12-16): You must use this form to explain to the Judge what has happened in your case that requires the person to be taken to a mental health facility for involuntary examination. **Please be as accurate as possible with the description of the person and attach a photo.**

__ Notice of Related Cases, Form 12.900(h), (Pages 18-21): This form lets the court know if you have any other cases involving the same parties, children, or issues in this case.

__ Date of Birth Form for Unified Family Court, Administrative Order (A.O.) 5.109, (Pg. 22)

__ Information / Description Sheet (Pg. 23): You may request that the Sheriff serve the other party in your case with the petition and related papers. This form is used to provide the Sheriff with the necessary information about the other party. **Please be as accurate as possible with the description of the person and attach a photo.**

File if Applicable to Your Case:

__ Disclosure from Nonlawyer, Form 12.900(a), (Pg. 25): Use this form when anyone who is not a lawyer in good standing with the FL Bar helps you complete any of the forms in this case.

__ Notice of Designation of E-Mail Address for Self Represented Litigants, Administrative Order (A.O.) 2.310, (Pages 27-28): Use this form to provide an email address to receive electronic notices and documents from the court and the other party to your case or to update your email address of record with the court.

__ Request to be Excused from E-Mail Service by a Party Not Represented by an Attorney, Form 2.601 (Pages 29-31): Use this form to opt out of email service if you do not have an email address or do not have regular access to the internet.



Bring to Your Hearing and Provide to Judge:

Final Disposition Form, Form 1.998, (Pg. 34-35): This form will be used by the court to report the outcome of your case.

Filing Instructions

- **Paper/ Original Documents:**

- You may file your paperwork either by visiting one of our four courthouse locations (see Page 2 of our instructions) or by U.S. mail to:

**Mental Health
P.O. Box 3597
West Palm Beach, FL 33402**

- Make 2 copies of all the documents that you complete.
 - Next, file all the applicable documents with the Clerk of the Circuit Court & Comptroller's office. Have all pages clipped together before filing (copies may be stapled together).
 - **If you mail your documents, make sure you provide an extra pre-addressed stamped envelope so that your copies may be returned.**
- **Electronic Documents:**
 - Self-represented litigants may file petitions or other pleadings or documents electronically, but 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 the procedures of the judicial circuit in which you file. The rules and procedures should be carefully read and followed. Instructions regarding e-filing are included in this packet.
 - You must first register in the Florida E-Filing Portal. Directions, a manual, and a short step by step video are available if you wish to learn to e-file your documents with the Clerk of the Circuit Court & Comptroller instead of filing a hard copy.
Go to: www.mypalmbeachclerk.com/court-services/e-filing/self-represented-filers.
Please note certain documents must be filed in original, hard copy format. A list of these documents are available on our website.

STEP-BY-STEP CASE GUIDE: BAKER ACT – INVOLUNTARY EXAMINATION

STEP ONE: Forms



File all the forms listed under “Include in Initial Filing” (Pg. 4).

STEP TWO: Review



Judge Reviews Petition and enters an emergency *ex-parte* (without hearing) court order.

STEP THREE: Transport



If granted, the Order will authorize the Sheriff to take the person into custody and deliver him or her to the nearest designated facility or hospital.

The order is good for 7 days or less if specified.

STEP FOUR: Evaluation



The facility has 72-hours from when the person arrives to conduct an examination and then must do one of three things:

One



Release the person if he or she does **not** meet the criteria for involuntary services.

OR

Two



Release the person for voluntary outpatient services or admit for voluntary inpatient services.

OR

Three



The Administrator of the Health Facility files a Petition for Involuntary Placement with the court.

STEP FIVE: Court Hearing

The hearing will be set within 5 days of the Petition for Involuntary Placement. Unless the person has a private attorney, the Judge must assign him or her a Public Defender within 1 working day. The Clerk will provide notice of the Petition and hearing to the initial petitioner, administrator, respondent, private attorney (if any), DCF, Public Defender, and State Attorney. If the Petition is granted, the Judge may order that the person be retained or transferred to a different facility and receive treatment for 90 days or maximum 6 months.

Instruction 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) Instructions for Florida Family Law Rules of Procedure Form 12.928, Cover Sheet for Family Court Cases (11/13)
- (D) Domestic Violence - all matters relating to injunctions for protection against domestic violence pursuant to section 741.30, Florida Statutes.
- (E) Dating Violence - all matters relating to injunctions for protection against dating violence pursuant to section 784.046, Florida Statutes.
- (F) Repeat Violence - all matters relating to injunctions for protection against repeat violence pursuant to section 784.046, Florida Statutes.
- (G) Sexual Violence - all matters relating to injunctions for protection against sexual violence pursuant to section 784.046, Florida Statutes.
- (H) Stalking-all matters relating to injunctions for protection against stalking pursuant to section 784.0485, Florida Statutes.
- (I) 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.
- (J) 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.
- (K) 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.
- (L) 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.
- (M) 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. 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

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

Case No.: _____

Judge: _____

Petitioner

and

Respondent

I. 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

II. 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
- (O) Paternity/Disestablishment of Paternity
- (P) Juvenile Delinquency
- (Q) Petition for Dependency
- (R) Shelter Petition
- (S) Termination of Parental Rights Arising Out Of Chapter 39
- (T) Adoption Arising Out Of Chapter 39
- (U) CINS/FINS

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

IN RE: _____ CASE NO.: _____

Petition and Affidavit Seeking Ex Parte Order Requiring Involuntary Examination

I, _____, being duly sworn, am filing this sworn
Print Name of Petitioner
statement requesting a court order for the involuntary examination of _____
(hereinafter referred to as PERSON). Print Name of Person

This petition and affidavit will be included in the PERSON's clinical record and may be viewed by the PERSON.

I understand that by filling out this form, the PERSON may be taken by law enforcement to a mental health facility for an examination.

I SWEAR that the answers to the following questions are given honestly, in good faith, and to the best of my knowledge.

1.
 - a. I live at: (Print Your Full Residence Address and Phone Number) Phone: _____
Street Address: _____ City _____
ST _____ Zip _____
 - b. I work as a: (Occupation) _____
Work Phone: _____ Work Street Address: _____
_____ City _____ ST _____ Zip _____
 - c. The PERSON lives at, or may be found at, the following address(es):
Street Address: _____ City _____
Street Address: _____ City _____
Street Address: _____ City _____
2. I have the following relationship with the PERSON: _____

3. (Check the one box that applies)

a. I or a family member have or have not previously made allegations to law enforcement involving this PERSON on _____ (Date) such as domestic violence, trespassing, battery, child abuse or neglect, Baker Act, neighborhood disputes, etc. as described: _____

b. This PERSON has or has not previously made allegations to law enforcement about me or my family on _____ (Date) such as domestic violence, trespassing, battery, child abuse or neglect, Baker Act, etc. as described: _____

4. (Check the one box that applies)

a. I or a family member are not now, and have not in the past, been involved in a court case with the PERSON.

b. I or a family member am now, or was, involved in a court case with the PERSON.

This case is/was a _____ in _____
Type of Case When

Explain: _____

5. I am on good terms with the PERSON at the present time. (Check one box) Yes No

If "no", please explain: _____

6. I have known the PERSON for _____ (how long).

a. The PERSON has only recently displayed unusual kinds of behavior.

b. The PERSON has, over a period of time, always acted in a strange manner.

c. The PERSON's behavior has developed over a period of time.

COMPLETE THE FOLLOWING ONLY IF THE SECTION APPLIES TO THIS CASE:

7. I have seen the following behavior, which causes me to believe that there is a good chance that the PERSON will cause serious bodily harm to himself/herself or others.

On _____ at approximately _____ am pm,
Date Time

I saw the PERSON: _____

8. Other similar behavior I have personally seen is as follows: _____

9. To my knowledge or belief, I do I do not believe these actions were a result of retardation, developmental disability, intoxication, or conditions resulting from antisocial behavior or substance abuse impairment.

CHECK AND/OR ANSWER APPLICABLE SECTIONS

10. a. I have attempted to get the PERSON to agree to seek assistance for a mental or emotional problem(s). I explained the purpose of the examination (describe when, who was present, and whether you or another person explained the need for the examination): _____

b. I did not try to get the PERSON to agree to a voluntary examination because: _____

c. The PERSON refused a voluntary examination because: _____

11. The following steps were taken to get the PERSON to go to a hospital for mental health care:

These steps did not work because: _____

12. I believe that the PERSON is unable to determine for himself/herself, why the examination is necessary because: _____

13. I believe that the PERSON has a mental illness which will keep the PERSON from being able to meet the ordinary demands of living because: _____

- _____
- _____
14. I believe that without care or treatment, the PERSON is likely to suffer from neglect or refuse to care for himself/ herself, because: _____
- _____
- _____
15. I believe that this lack of care or neglect will lead to the PERSON hurting himself or herself because: _____
- _____
- _____
16. Can family or close friends now provide enough care to avoid harm to the PERSON? Yes
 No, If not, why? _____
- _____
- _____
- _____

Provide the following identifying information about the person (if known) if it is determined necessary to take the person into custody for examination:			
County of Residence:		Age:	
Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Attach a picture of the PERSON if possible.	
Picture attached: <input type="checkbox"/> No <input type="checkbox"/> Yes			
Height:	Weight:	Hair Color:	Eye Color:
Does the PERSON have access to any weapons? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:			
Is the PERSON violent now? <input type="checkbox"/> No <input type="checkbox"/> Yes Has the person been violent in the recent past? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Describe:			
Does the PERSON have any pending criminal charges against him/her? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:			
GUARDIANSHIP:			
1) Does the PERSON have a legal guardian? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2) Is there a pending petition to determine the PERSON's capacity and for the appointment of a guardian? <input type="checkbox"/> No <input type="checkbox"/> Yes			

If YES to either of the above, provide the name, address and phone number of the current or proposed guardian.

Name: _____ Phone: _____

Address: _____

City: _____ Zip: _____

PHYSICIAN: Name: _____ Phone: () _____

MEDICATIONS: Provide name of medications if known.

CASE MANAGEMENT: Provide name and phone number of case manager or case management agency, if known.

I understand that this sworn statement is given under oath and will be treated as though it was made before a judge in a court of law. I understand that any information in this sworn statement which is not to the best of my knowledge and done in good faith may expose me to a penalty for perjury and other possible penalties under the statutes of the State of Florida.

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

Signature of Affiant/Petitioner: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this ___ day of _____, _____, by _____.

[Notary Seal]

NOTARY PUBLIC or DEPUTY CLERK

Name typed, printed or stamped

My Commission Expires: _____

Type of Identification Produced _____

Type of Identification Produced _____

A copy of the petition(s) must be attached to an Ex Parte Order for Involuntary Examination and accompany the person to the nearest receiving facility.

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 FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH 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]

<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 Violence or Stalking Injunctions	<input type="checkbox"/> Mental Health
	<input type="checkbox"/> Other <i>{specify}</i> _____

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]

- | | |
|--|--|
| <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
Violence or Stalking Injunctions | <input type="checkbox"/> Mental Health |
| | <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: _____

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
Violence or Stalking Injunctions | <input type="checkbox"/> Mental Health |
| | <input type="checkbox"/> Other <i>{specify}</i> _____ |

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} _____

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

Case No: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent.

Date of Birth Form for Unified Family Court

Instructions

Pursuant to Administrative Order 5.109, this form is to be completed and filed with the Clerk's Office in all new and reopened Unified Family Court ("UFC") cases. UFC case types include but are not limited to all family, juvenile, mental health, domestic violence and guardianship cases. A detailed list of UFC case types can be found in Administrative Order 5.101.

Sensitive Information (month and day of birth/names of minors) will be redacted by the Clerk and will not appear in a document accessible by the general public.

Information

Petitioner's Name		Petitioner's D.O.B	
Petitioner's Address			
Respondent's Name		Respondent's D.O.B	
Respondent's Address			
Child's Name		Child's D.O.B	
Child's Name		Child's D.O.B	
Child's Name		Child's D.O.B	
Child's Name		Child's D.O.B	
Child's Name		Child's D.O.B	
*Please attach an additional page for additional Party or Child			

Filed by: _____
Type/Print your name

PLEASE PRINT LEGIBLY

Division: Probate/Mental Health
INFORMATION / DESCRIPTION SHEET

TO: THE PALM BEACH COUNTY SHERIFF'S OFFICE

Case No. _____ Division: _____

RESPONDENT'S NAME: _____

AKA (also known as): _____

RESIDENTIAL ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TEMPORARY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

RACE: _____ SEX: _____ AGE: _____ D.O.B. _____

HEIGHT: _____ WEIGHT: _____ HAIR COLOR: _____

EYE COLOR: _____ TATTOOS: _____

DL/STATE ID: _____ SS#: (ENTIRE #): _____

DISTINGUISHING MARKS/ FEATURES: _____

ADDITIONAL INFORMATION THAT WOULD ASSIST WITH SERVICE: _____

BEST TIME TO SERVE: _____

PETITIONER'S NAME: _____

D.O.B. _____ RELATIONSHIP TO RESPONDENT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

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 FIFTEENTH JUDICIAL CIRCUIT,
IN AND FOR PALM BEACH 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: _____

Telephone Number: _____



THE
15TH JUDICIAL CIRCUIT
OF FLORIDA
ADMINISTRATIVE OFFICE OF THE COURT

E-SERVICE INSTRUCTIONS FOR SELF REPRESENTED PARTIES

Pursuant to the Florida Rule of Judicial Administration 2.516, self-represented parties involved in any type of case in any Florida court, may, but are not required to, serve on the opposing party's attorney court documents by e-mail.

E-mail Service to/from an Opposing Party: Self-represented parties opting to serve court documents by e-mail may do so by designating a primary e-mail address (and up to 2 secondary e-mail addresses) for receiving service in that proceeding. This designation only informs the other side of your email address. Once a party has filed an e-mail address designation in a proceeding, all court documents required or permitted to be served on a party must be served by e-mail unless the parties otherwise agree or a court orders otherwise.

E-Mail Service from Participating Judges: Self-represented parties who want to receive court orders and other court documents from judges who use e-mail service **MUST** register with the 15th Judicial Circuit's online services system at **www.15thcircuit.com/html/onlineservices**. You will **NOT** receive court documents from participating judges unless and until you register with the 15th Judicial Circuit's online system.

Form of Email: E-mail service is made by attaching a copy of the document to be served in PDF format to an e-mail. The e-mail's subject line must state "SERVICE OF COURT DOCUMENT" in all capital letters, followed by the case number of the relevant proceeding. The body of the e-mail must identify the: (1) court in which the proceeding is pending; (2) case number; (3) name of the initial party on each side; (3) title of each document served with that e-mail; (4) sender's name; (5) sender's telephone number. The e-mail and attachments together may not exceed 5 megabytes in size; e-mails that exceed the size requirement must be divided into separate e-mails (no one of which may exceed 5 megabytes) and labeled sequentially in the subject line. Documents served by e-mail may be signed by "/s/", "/s" or "s" as long as the document filed with the Clerk's Office is signed in accordance with the applicable rule of procedure.

Service Dates: Service by e-mail is deemed complete on the date it is sent. E-mail service is treated as service by mail for the computation of time. When, in addition to service by e-mail, the sender also utilizes another means of service provided for in the Rules of Judicial Administration, the computation of time will be based on the method of service that has the shortest response time.

Filing of Documents: The Rules of Judicial Administration require that all documents be filed with the court either before service on the opposing party or immediately thereafter. Documents are deemed filed when they are filed with the clerk of court. If the sender learns that the e-mail did not reach the address of the person to be served, the sender must immediately send another copy by e-mail, or serve by a means authorized by subdivision (b)(2) of the Rules of Judicial Administration.

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

CASE NO.: _____

_____,
Plaintiff/Petitioner

v.

_____,
Defendant/Respondent

**DESIGNATION OF E-MAIL ADDRESS BY A PARTY NOT
REPRESENTED BY AN ATTORNEY**

Pursuant to Fla. R. Gen. Prac. & Jud. Admin. 2.516(b)(1)(C),

I, (full legal name) _____, designate the E-mail address(es)
below for electronic service of all documents related to this case.

Designated E-mail Address: _____

Secondary E-mail Address: _____

Other E-mail Address: _____

1. By completing this form, I am authorizing the Court, the Clerk of the Fifteenth Judicial Circuit of Florida, and all parties to send copies of notices, orders, judgments, motions, pleadings, or other written communications to me by e-mail or through the Florida Courts E-filing Portal.
2. I understand that I must keep the clerk's office and the opposing party or parties notified of my current mailing and e-mail address(es) and that all copies of notices, orders, judgments, motions, pleadings, or other written communications in this case will be served at the e-mail address(es) on record at the clerk's office.

(Signature)

(Printed Name)

(E-mail Address)

(Phone Number)

CERTIFICATE OF SERVICE

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

Other party or his/her attorney

Name: _____

Address: _____

City, State, Zip: _____

Fax Number: _____

E-Mail Address(es): _____

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} _____

{street} _____

{city} _____, {state} _____ {telephone number} _____

Form 2.601, REQUEST TO BE EXCUSED FROM E-MAIL SERVICE BY A PARTY NOT REPRESENTED BY AN ATTORNEY

Rule 2.516 of the Rules of General Practice and Judicial Administration, SERVICE OF PLEADINGS AND DOCUMENTS, is amended to require self-represented litigants to provide an email address for service of court documents, unless the party is in custody or unless the party is excused by the Clerk because the party declares under penalty of perjury that they do not have an email address or do not have regular access to the Internet. In order for the self-represented litigant to make the declaration of lack of email address or regular Internet access, they must complete this form.

If a pro se litigant is not requesting to be excused from e-mail service, they can use Form 2.602, Notice of Email Designation, to specify up to three (3) email addresses where they would like to receive e-mail service from the court and other parties in their case.

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

Case No.: _____

Division: _____

_____,
Plaintiff/Petitioner,

and

_____,
Defendant/Respondent.

**REQUEST TO BE EXCUSED FROM E-MAIL SERVICE FOR A PARTY NOT
REPRESENTED BY AN ATTORNEY**

(Name) _____ requests to be excused pursuant to Fla. R. Gen. Prac. & Jud. Admin. 2.516(b)(1)(D) from the requirements of e-mail service because I am not represented by an attorney and:

- I do not have an e-mail account.
- I do not have regular access to the internet.

By choosing not to receive documents by e-mail service, I understand that I will receive all copies of notices, orders, judgments, motions, pleadings, or other written communications by delivery or mail at the following address: _____

(Address)

I understand that I must keep the clerk's office and the opposing party or parties notified of my current mailing address.

Pursuant to section 92.525, Florida Statutes, under penalties of perjury, I declare that I have read the foregoing request and that the facts stated in it are true.

Dated: _____

Signature: _____

Print name: _____

Phone number: _____

CLERK'S DETERMINATION

Based on the information provided in this request, I have determined that the applicant is
 excused or not excused from the e-mail service requirements of Fla. R. Gen. Prac. & Jud.
Admin. 2.516(b)(1)(C).

Dated: _____

Signature of the Clerk of Court: _____

CERTIFICATE OF SERVICE

I certify that a copy hereof has been furnished to the Clerk of Court for Palm Beach
County and (insert name(s) and address(es) of parties used for service) _____

by (delivery) (mail) _____ on (date) _____

(Name of party)

**A PERSON, WHO IS NOT EXCUSED, MAY SEEK REVIEW BY A JUDGE BY
REQUESTING A HEARING TIME.**

Sign here if you want the Judge to review the clerk's determination that you are not
excused from the e-mail service requirements. You do not waive or give up any right to
judicial review of the clerk's determination by not signing this part of the form:

Dated: _____

Signature: _____

Print name: _____

**INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE
FORM 12.999
FINAL DISPOSITION FORM
(03/17)**

When should this form be used?

This form is filed by the petitioner or respondent for the use of the clerk of the court for the purpose of reporting judicial workload data under section 25.075, Florida Statutes. When your case is completed, the petitioner or respondent must complete this form and file it with the clerk.

What should I do next?

This form must be typed or printed in black ink. After completing and signing this form, you should then file it and keep a copy for your records.

A copy of this form must be e-mailed, mailed, or hand delivered to the other party(ies) in your case.

Instructions for completing this form

- I. Case Style.** Enter the name of the court, the case number assigned at the time of the filing of the petition, counterpetition, or motion, the name of the judge assigned, and the names of the petitioner and respondent.
- II. Means of Final Disposition.** Place an “x” on the appropriate line before the major category and the appropriate subcategory, if applicable. The following are the definitions of the disposition categories.
- A. Dismissed Before **Hearing** or **Trial**. The case is settled, voluntarily dismissed, or otherwise disposed of before a hearing or trial is held.
 - B. Dismissed Under Settlement, Before Hearing or Trial. Before hearing or trial, the case is voluntarily dismissed by the petitioner, respondent, or movant after a settlement.
 - C. Dismissal Under Mediated Settlement, Before Hearing or Trial. The case is voluntarily dismissed by the petitioner or respondent after a settlement is reached with mediation before a hearing or trial is held.
 - D. Other, Before Hearing or Trial. The case is dismissed before a hearing or trial in an action that does not fall into one of the other disposition categories on this form.
 - E. Dismissal Before Hearing or Trial. The case is dismissed by a judge voluntarily after a hearing or trial is held.

- F. Dismissed Under a Settlement, After Hearing or Trial. The case is voluntarily dismissed by the petitioner, respondent, or movant after a settlement is reached without mediation after a hearing or trial is held.
- G. Dismissal Under a Mediated Settlement, After Hearing or Trial. The case is voluntarily dismissed by the petitioner, respondent, or movant after a settlement is reached with mediation after a hearing or trial.
- H. Other, After Hearing or Trial. The case is dismissed after hearing in an action that does not fall into the categories listed on this form.
- I. Disposed by **Default**. A respondent chooses not to or fails to contest the petitioner's allegations and a judgment against the respondent is entered by the court.
- J. Disposed by Judge. A judgment or disposition is reached by the judge in a case that is not dismissed and in which no trial has been held. Includes stipulations by the parties, conditional judgments, summary judgment after hearing, and any manner in which a judgment is entered, excluding cases disposed of by default as in category I. above.
- K. Disposed by Nonjury Trial. The case is disposed as a result of a contested trial in which there is no jury and in which the judge determines both the issues of fact and the law in the case.
- L. Disposed by Jury Trial. Any part of the case is disposed as a result of a jury trial (considered the beginning of a jury trial to be when the jurors and alternates are selected and sworn).
- M. Other. The case is consolidated, submitted to mediation or arbitration, transferred, or otherwise disposed of by any other means not listed in categories (A) to (L).

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.

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

Case No: _____

Division: _____

{Petitioner} _____

FINAL DISPOSITION FORM

II. Means of Final Disposition

Place an "x" on the line for the major category and one subcategory, if applicable only.

- _____ Dismissed before hearing/trial
 - _____ Dismissed pursuant to settlement, before hearing or trial
 - _____ Dismissed under a mediated settlement before hearing or trial
 - _____ Other, before hearing or trial

- _____ Dismissed after hearing or trial
 - _____ Dismissed pursuant to a settlement, after hearing or trial
 - _____ Dismissed pursuant to a mediated settlement, after hearing or trial
 - _____ Other after hearing or trial

- _____ Disposed by default

- _____ Disposed by judge

- _____ Disposed by nonjury trial

- _____ Disposed by jury trial

- _____ Other {specify} _____

Date: _____

Signature of Attorney or Party
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
E-mail address(es): _____
Fax 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}* _____.