

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA
FAMILY LAW DIVISION

_____,
Petitioner
and

CASE NO.: _____

_____,
Respondent

DIVISION: _____

JOINT MOTION FOR INCOME WITHHOLDING ORDER (IWO)

COMES NOW the Petitioner and Respondent, and request entry of an Income Withholding Order (IWO) in the above referenced case.

1. A () Final Judgment () Order for Support (check one) was entered in this case on _____
_____ (date) and ordered: (check all that apply)

_____ child support in the amount of \$_____ per: month / week / bi-weekly
(circle one),

_____ alimony in the amount of \$_____ per: month / week / bi-weekly (circle
one).

2. A copy of the Final Judgment or Order for Support is attached to this Motion.

3. The Final Judgment/Order for Support required the () Petitioner () Respondent to pay:

_____ the Oblige, directly.

_____ Other: _____.

4. The Petitioner and Respondent are requesting an IWO for the following reason/s: _____

Dated: _____

Dated: _____

Signature of Petitioner
Printed Name: _____
Address: _____
City, State, Zip _____
Telephone Number _____
Fax Number _____

Signature of Respondent
Printed Name: _____
Address: _____
City, State, Zip _____
Telephone Number _____
Fax Number _____

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was
acknowledged before me, by means
of physical presence or online
notarization, this ____ day of _____,
_____(year), by _____

The foregoing instrument was
acknowledged before me, by means
of physical presence or online
notarization, this ____ day of _____,
_____(year), by _____

NOTARY PUBLIC or DEPUTY CLERK

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of
notary or deputy clerk.]
____ Personally known
____ Produced identification / Type of
identification produced: _____

[Print, type, or stamp commissioned name of
notary or deputy clerk.]
____ Personally known
____ Produced identification / Type of
identification produced: _____

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN
THE BLANKS BELOW:** [fill in all blanks]

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