

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

IN RE: THE MATTER OF:

Petitioner,

Case No.

and

Division

Respondent.

_____ /

TEMPORARY RELIEF HEARING MEMORANDUM

1. Petitioner's Name: _____

Employer: _____

Gross Annual Income \$ _____ Monthly Net Income \$ _____

2. Respondent's Name: _____

Employer: _____

Gross Annual Income \$ _____ Monthly Net Income \$ _____

3. Children's Names:

_____ Age _____ DOB _____

_____ Age _____ DOB _____

_____ Age _____ DOB _____

_____ Age _____ DOB _____

4. Issues to be determined at temporary hearing (check each one that applies):

Shared Parental Responsibility

Time sharing Plan (Visitation Schedule)

Exclusive Use of Residence

Temporary Alimony

Temporary Child Support With/Without: (A) Cost of Daycare \$ _____

(B) Cost of Children(s) Medical Insurance \$ _____

Temporary Fees and Costs requested \$ _____, and the proposed source of funds to pay same is _____.

Other (debt payments, private school tuition and transportation for visitation, etc.):

List: _____

5. The following, when applicable, MUST be attached to this Memorandum or your hearing SHALL be continued:

- A. Child Support Guidelines calculations
- B. Proposed Temporary Alimony/Support calculations
- C. Current Financial Affidavit with the last three payroll stubs or W-2 and K-1 for the immediately-preceding year.
- D. Attorney's Fees Affidavit
- E. Proposed Parenting Plan

Signature of Attorney or Party
Fla. Bar No. _____
Address: _____

Phone No. _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been furnished by U. S. Mail this ____ day of _____, 20__ to _____

Signature of Attorney or Party