

INSTRUCTIONS FOR THIRTEENTH JUDICIAL CIRCUIT FORM
JOINT PETITION TO DETERMINE PATERNITY AND FOR RELATED RELIEF

When should this form be used?

This form should be used jointly by a birth mother and father to ask the court to establish **paternity**, a **time-sharing schedule**, and/or **child support** of a minor child or children. This means that you are trying to legally establish who is the father of the child(ren).

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

What should I do next?

For the purposes of handling this case you should agree upon who will be the petitioner and handle all the matters of filing the pleadings and setting up the hearing. Since this is a joint form, service on the Respondent is not required. The petitioner should call to request a hearing date a few days after the petition has been filed. It is the petitioner's responsibility to notify the other party of the hearing by using a **Notice of Hearing (General)**, Florida Supreme Court Approved Family Law Form 12.923, or other appropriate notice of hearing form.

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.

Special notes...

More than one child of the same alleged father may be listed on a single petition. However, if you are filing a paternity action involving more than one possible father, a separate petition must be filed for each alleged father.

If you wish to have the Court order a scientific paternity test, one of you should file a Motion for **Scientific Paternity Testing**, Florida Supreme Court Approved Family Law Form 12.983(e). This is used to ask the court to order a scientific test to determine who is the child(ren)'s father.

If the father signed papers at the hospital acknowledging, under oath, that he was the father paternity was established as a matter of law. This should be checked on page 2, section 9a on this form. If the paternity of a child who was conceived or born during a marriage is at issue, the court may appoint a **guardian ad litem** to assist the court in this matter and to protect the rights of the child.

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

- **Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d).
- **Notice of Social Security Number**, Florida Supreme Court Approved Family Law Form 12.902(j).
- **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.)

- **Parenting Plan**, Florida Supreme Court Approved Family Law Form, 12.995(a), or **Supervised/Safety Focused Parenting Plan**, Florida Supreme Court Approved Family Law Form 12.995(b). If the parents have reached an agreement, a signed and notarized Parenting Plan should be attached. If the parents have not reached an agreement, a proposed Parenting Plan **may** be filed.

Parenting Plan and Time-Sharing. The judge will decide the parenting arrangements based on the child(ren)'s best interests. Regardless of whether there is an agreement between the parties, the court reserves jurisdiction to modify issues relating to minor or dependent child(ren).

The judge may request a **parenting plan recommendation** or appoint a **guardian ad litem** in your case. This means that a neutral person will review your situation and report to the judge concerning parenting issues. The purpose of such intervention is to be sure that the best interests of the child(ren) are being served. For more information, you may consult sections 61.401–61.405, Florida Statutes.

Listed below are some terms with which you should become familiar before completing your petition. **If you do not fully understand any of the terms below or their implications, you should speak with an attorney before going any further.**

- **Shared Parental Responsibility**
- **Sole Parental Responsibility**
- **Supervised Time-Sharing**
- **No contact**
- **Parenting Plan**
- **Parenting Plan Recommendation**
- **Time-Sharing Schedule**

Child Support. The court may order one parent to pay **child support** to assist the other parent in meeting the child(ren)'s material needs. **Both parents are required to provide financial support**, but one parent may be ordered to pay a portion of his or her support for the child(ren) to the other parent.

Florida has adopted guidelines for determining the amount of child support to be paid. These guidelines are based on the combined income of **both** parents and take into account the financial contributions of both parents. You should file a **financial affidavit**, and the other parent will be required to do the same. From your financial affidavits, you should be able to calculate the amount of child support that should be paid. Because the child support guidelines take several factors into consideration, change over time, and vary from state to state, your child support obligation may be more or less than that of other people in seemingly similar situations.

Final Judgments. These family law forms contain a **Final Judgment of Paternity**, Florida Supreme Court Approved Family Law Form 12.983(g), which the judge may use. You should check with the clerk, family law intake staff, or judicial assistant to see if you need to bring it with you to the hearing. 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.

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 THIRTEENTH JUDICIAL CIRCUIT
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA**

_____,
Petitioner,

and

_____,
Respondent.

Case No. _____

Division: _____

JOINT PETITION TO DETERMINE PATERNITY AND FOR RELATED RELIEF

Petitioner, *{full legal name}* _____, and
Respondent, *{full legal name}* _____, being
sworn, certify that the following information is true:

This is an action for paternity and to determine parental responsibility, a parenting plan/time-sharing schedule, and child support under chapter 742, Florida Statutes.

SECTION I.

1. The Petitioner and Respondent are the mother and biological father of the following minor child(ren):

	Name	City/State of Birth	Birth Date	Sex
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____
(5)	_____	_____	_____	_____
(6)	_____	_____	_____	_____

2. Petitioner currently lives at: *{street address, city, state}* _____
_____.

3. Respondent currently lives at: *{street address, city, state}* _____
_____.

4. 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 the Amended Sailors' and Soldiers' Civil Relief Act of 1940.

5. Neither Petitioner nor Respondent is mentally incapacitated.

6. 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.

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

8. A completed Financial Affidavit, Florida Family Law Rules of Procedure is, or will be, filed by both parties.

9. Paternity Facts.

[check **one** only]

___ a. Paternity has previously been established as a matter of law.

___ b. The parties engaged in sexual intercourse with each other in the *year(s)* _____ at *{city and state}* _____

As a result of the sexual intercourse, () Petitioner () Respondent became pregnant with the minor child(ren) named in paragraph 1. The mother did not engage in sexual intercourse with any other man.

10. The mother () was () was not, married at the time of the conception child(ren) named in paragraph 1. If the mother was married, husband at the time of conception and/or birth is:

SECTION II. PARENTING PLAN ESTABLISHING PARENTAL RESPONSIBILITY AND TIME-SHARING

1. The minor child(ren) currently reside(s) with [] Mother [] Father [] Other: *{explain}* _____

2. **Parental Responsibility.** It is in the child(ren)'s best interests that parental responsibility be: [one only]

a. ___ shared by both Father and Mother.

b. ___ awarded solely to [] Father [] Mother. Shared parental responsibility would be detrimental to the child(ren) because: _____

3. **Parenting Plan and Time-Sharing.** It is in the best interests of the child(ren) that the family be ordered to comply with a Parenting Plan that [] includes [] does **not** include parental time-sharing with the child(ren). The Petitioner states that it is in the best interests of the child(ren) that:

[one only]

a. ___ The attached proposed Parenting Plan should be adopted by the court.

The parties [] have [] have **not** agreed to the Parenting Plan.

- b. ___ The court should establish a Parenting Plan with the following provisions:
- [] No time-sharing for the [] Father [] Mother
 [] Limited time-sharing with the [] Father [] Mother
 [] Supervised time-sharing for the [] Father [] Mother.
 [] Supervised or third-party exchange of the child(ren).
 [] Time-sharing schedule as follows:

Explain why this schedule is in the best interests of the child(ren): _____

4. The minor child(ren) should

[check **only** one]

___ a. retain his/her (their) present name(s).

___ b. receive a change of name as follows:

present name(s)	be changed to
(1) _____	(1) _____
(2) _____	(2) _____
(3) _____	(3) _____
(4) _____	(4) _____
(5) _____	(5) _____
(6) _____	(6) _____

SECTION III. CHILD SUPPORT

[check **all** that apply]

___ 1. Petitioner () Respondent () requests that the Court award child support as determined by Florida's child support guidelines, section 61.30, Florida Statutes. A completed Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e), is or will be filed. Such support should be ordered retroactive to

[check **one** only]

___ a. the date when the parents did not reside together in the same household with the child, not to exceed a period of 24 months before the date of filing of this petition.

___ b. the date of the filing of this petition.

___ c. other: {date} _____ .

{Explain} _____

___ 2. Petitioner () Respondent () requests that the Court award a child support amount that is more than or less than Florida's child support guidelines. Both parties understand that a Motion to Deviate from Child Support Guidelines, Florida Supreme Court Approved Family Law Form 12.943, **must** be completed and filed by one of the parties before the Court will consider this request.

____ 3. Both parties jointly request that medical/dental insurance coverage for the minor child(ren) be provided by:

[check **one** only]

- ____ a. Father.
- ____ b. Mother.

____ 4. Both parties jointly request 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).
- ____ e. Other {explain} _____

____ 5. Both parties jointly request that life insurance to secure child support be provided by:

[check **one** only]

- ____ a. Father.
- ____ b. Mother.
- ____ c. Both.

____ 6. () Petitioner () Respondent () Both has (have) incurred medical expenses in the amount of \$_____ on behalf of the minor child(ren), including hospital and other expenses incidental to the birth of the minor child(ren). There should be an appropriate allocation or apportionment of these expenses.

____ 7. () Petitioner () Respondent () Both has (have) received past public assistance { *i.e.* Aid to Families with Dependent Children (AFDC), Medicaid, Food Stamps, etc. } for this (these) minor child(ren).

PETITIONER'S AND RESPONDENT'S REQUEST

1. Petitioner and Respondent request a hearing on this petition and understand that they must both attend the hearing.

2. Petitioner and Respondent requests that the Court enter an order that:

[check **all** that apply]

- ____ a. establishes paternity of the minor child(ren), ordering proper scientific testing, if necessary;
- ____ b. establishes parental responsibility and a parenting plan/time-sharing schedule with the minor child(ren);
- ____ c. awards child support, including medical/dental insurance coverage for the minor child(ren);
- ____ d. determines the appropriate allocation or apportionment of all expenses incidental to the birth of the child(ren), including hospital and medical expenses;
- ____ e. determines the appropriate allocation or apportionment of all other past, present, and future medical and dental expenses incurred or to be incurred on behalf of the minor child(ren);
- ____ f. changes the child(ren)'s name(s);
- ____ g. other relief as follows: _____

We understand that we are swearing or affirming under oath to the truthfulness of the claims made in this document and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

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

Sworn to (or affirmed) and subscribed
before me, by means of physical presence
or online notarization, this ____ day of __
_____, _____(year), by _

Sworn to (or affirmed) and subscribed
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.