

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT,
IN AND FOR HILLSBOROUGH COUNTY, STATE OF FLORIDA

Petitioner, Case No. _____
AND

Respondent. Division _____
_____ /

MOTION [check one]:

- TO SET ASIDE DISMISSAL AND RE-OPEN CASE**
 FOR REHEARING
 TO VACATE
 TO COMPEL COMPLIANCE WITH MANDATORY DISCLOSURE

I, [state your name] _____, the [circle one] Petitioner / Respondent in this case am requesting that the following Motion [check one] be granted:

TO SET ASIDE DISMISSAL AND RE-OPEN CASE,
My petition was dismissed and I would like the court to set aside the dismissal which was entered on [date] _____ for the following reasons: _____

FOR REHEARING
A hearing was held on [date] _____ and I am requesting a re-hearing pursuant to Fla.R.Civ.P. 1.530. This Motion for Rehearing is being filed within 15 days from the date of the filing of the judgment or order. The reasons I am requesting a rehearing are: _____

TO VACATE
An order was entered on [date] _____ upon a Recommended Order of a General Magistrate or Hearing Officer. I am requesting that this order be vacated pursuant to Fla.Fam.L.R.P. 12.490(e) and/or 12.491(f). This Motion to Vacate is being filed within 10 days from the date the order was entered. The reasons I am requesting that the order be vacated are: _____

_____ TO COMPEL COMPLIANCE WITH MANDATORY DISCLOSURE

A Petition has been filed and it has been more than 45 days since the Respondent was served with the Petition. The other party has not complied with Mandatory Disclosure rule Fla.Fam.L.R.P. 12.285 which requires each party to provide certain financial records to the other party within 45 days from the date of service. The other party [check one]: ___ has not provided any of the required documents / ___ has provided some but not all of the required documents. The reasons I am requesting that the other party be ordered to comply with mandatory disclosure are: _____

WHEREFORE, I request that the court grant this motion.

I HEREBY CERTIFY that a copy of this Motion has been furnished by [check one only] () mail () faxed and mailed () hand delivered to the person(s) listed below on _____ [date].

Other party or his/her attorney:

Name: _____
Address: _____
City, State, Zip: _____

Dated: _____

Signature of Party
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
Designated E-mail Address(es): _____

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 _____
_____.

NOTARY PUBLIC or DEPUTY CLERK

[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.