

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

STATE OF FLORIDA, Department of
Revenue/Child Support Enforcement:

_____,
Petitioner,

vs.

_____,
Respondent.

_____ /

MOTION TO CORRECT CHILD SUPPORT ACCOUNT:

1. I, _____, a party in this matter, respectfully requests this Honorable Court to correct the child support account as follows:

2. The child support records reflect a balance of \$ _____ as of _____, 20__.
3. The child support balance SHOULD be \$ _____ as of _____, 20__.
4. _____ BOTH parties agree to this amount and have signed this motion before a notary.
_____ A written consent signed by the other party before a notary is attached.
_____ The moving party requests a hearing on this motion.

Signature of Party

Printed name: _____

Address: _____

City/State/Zip _____

Email: _____

State of Florida
County of _____

Date: _____

Signature of Party filing motion

Printed name: _____

Sworn to (or affirmed) and subscribed before me on this (date) _____, 20__.

Notary or Deputy Clerk

Print name or stamp commissions name of notary

Check one: Personally known
 Produced identification: Type of identification: _____

OTHER PARTY:

Date: _____

Signature of Other Party

Printed name: _____

Address: _____

City/State/Zip _____

Telephone: _____

Email: _____

Sworn to (or affirmed) and subscribed before me on this day _____, 20__.

Notary or Deputy Clerk

Print name or stamp commissions name of notary

Check one: Personally known
 Produced identification: Type of identification: _____

Certificate of Service

I HEREBY CERTIFY that a copy has been furnished by mail/hand delivery to the person listed below this _____ day of _____, 20__, to _____ (address) _____.

Signature of Party Filing Motion