

**INSTRUCTIONS FOR FLORIDA FAMILY LAW FORM  
NOTICE OF HEARING ON MOTION FOR CONTEMPT**

**When should this form be used?**

Use this form anytime you have set a hearing on a Motion for Contempt Florida Family Law Form 12.960. Before you fill out this form, you should coordinate a hearing time and date with the Judge and the other party. If the Department of Revenue is a party to the case, you may need to schedule your hearing time with the attorney for the Department of Revenue.

This form should be typed or printed in black ink. After completing this form, you should file the original with the Clerk of the Circuit Court in the county where your case was filed and keep a copy for your records.

**What should I do next?**

A copy of this form must be personally served by a sheriff or private process server to any other party(ies) in your case. Please note that if notice is mailed, the court in certain circumstances may not consider mailing to be adequate notice. This is a technical area of the law; if you have any questions about it, you should consult a lawyer. For more information on personal service, see the instructions for Summons: Personal Service on an Individual, Florida Family Law Form 12.910(a).

**Where can I look for more information?**

Before proceeding, you should read "General Information for Pro Se Litigants" found at the beginning of these forms. For further information, see rules 12.615 and 12.941, Florida Family Law Rules of Procedure.

**Special notes...**

An attorney who has been appointed by the court to serve as a child support enforcement hearing officer can also be appointed to serve as a general master. If your case involves only child support issues, your case properly may be referred to a general master acting as a child support enforcement hearing officer.

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 Disclosure from Nonlawyer, Florida Family Law Form 12.900, 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.

**\* Complete all information except for hearing date and time.**

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

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

\_\_\_\_\_,  
Petitioner,  
and  
\_\_\_\_\_,  
Respondent,

**NOTICE OF HEARING ON  
MOTION FOR CONTEMPT**

TO: *{name of other party}* \_\_\_\_\_

There will be a hearing before The Honorable \_\_\_\_\_, on  
*{date}* \_\_\_\_\_, at *{time}* \_\_\_\_\_, in *{place}* \_\_\_\_\_

of the Lake County Courthouse, 550 West Main Street, Tavares, FL 32778.

On the [ ] Petitioner's [ ] Respondent's,

[ ] **Motion for Contempt on support matters (Rule 12.615)**

[ ] **Motion for Contempt on** \_\_\_\_\_ .

\_\_\_\_\_ minutes have been reserved for this hearing.

**YOU ARE ADVISED THAT FOR THIS HEARING:** No electronic recording is provided by the court **unless** the hearing is with a General Magistrate. The court does not provide a court reporter. A party may provide a court reporter at the party's expense.

**FAILURE TO APPEAR AT THE HEARING MAY RESULT IN THE COURT ISSUING A WRIT OF BODILY ATTACHMENT FOR YOUR ARREST. IF YOU ARE ARRESTED, YOU MAY BE HELD IN JAIL UP TO 48 HOURS BEFORE A HEARING IS HELD.**

**IF YOUR CASE INVOLVES CHILD SUPPORT** you are strongly urged to prepare and file a Florida Family Law Rules of Procedure Financial Affidavit, prior to the hearing, as your ability to pay is a critical issue in this contempt proceeding. You will be provided an opportunity at the hearing to respond to allegations and questions about your present financial status.

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact ADA coordinator at the Office of the Trial Court Administrator, 550 West Main Street, P. O. Box 7800, Tavares Florida, 32778-7800: Telephone 352-742-4221, within two (2) working

days of your receipt of this order. If you are hearing or voice impaired call, TDD 1-800-955-8771, Florida Relay Service 711.

No later than ten (10) days prior to the scheduled court hearing, if an interpreter is needed, the person requiring the interpreter's services must request an appropriate court interpreter for the hearing via the Fifth Circuit website:

<https://www.circuit5.org/programs-services/interpreting-services/>

Should the party requesting the interpreter fail to appear at the court hearing, that party may be responsible for the costs of the interpreter's appearance.

Additional information on Court Interpreting Services is located at [www.circuit5.org](http://www.circuit5.org) under the Programs & Services section.

Si alguien necesita intérprete, la persona que requiere los servicios de un intérprete debe solicitar un intérprete apropiado por lo menos diez (10) días antes de la audiencia judicial programada. El pedido se hace por el sitio web del Quinto Circuito:

<https://www.circuit5.org/programs-services/interpreting-services/>

Si la parte que pide un intérprete no comparece en la audiencia judicial, puede que a aquella parte se le imponga el costo de la comparecencia del intérprete.

Información adicional acerca de los Servicios de Interpretación Judicial está disponible en el sitio web [www.circuit5.org](http://www.circuit5.org) bajo la sección titulada "Programs & Services."

If you are represented by an attorney or plan to retain an attorney for this matter, you should notify the attorney of this hearing.

**If this matter is resolved, the moving party shall contact the judge's office to cancel this hearing.**

I certify that a copy of this document was [X one only] ( ) **personally served by a sheriff or private process server** ( ) mailed ( ) hand delivered to the person(s) listed below on  
{date} \_\_\_\_\_.

**Other party or his/her attorney:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Party

Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

**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}* \_\_\_\_\_ a *{city}*.  
*{state}* \_\_\_\_\_, *{phone}* \_\_\_\_\_, helped *{name}*.  
who is the [ / **one** only] \_\_\_\_\_petitioner **or** \_\_\_\_\_ respondent, fill out this form.