

**IN THE CIRCUIT COURT, EIGHTEENTH JUDICIAL CIRCUIT,  
IN AND FOR BREVARD COUNTY, FLORIDA**

**DIVISION:** \_\_\_\_\_ **CASE NUMBER: 05 - - - - XXXX-XX**

**PETITIONER**

\_\_\_\_\_

**RESPONDENT**

\_\_\_\_\_

**FAMILY COURT COVER SHEET**

(Complete and submit with initial paperwork)

Type of Action/Proceeding. Place a check in the appropriate box beside the proceeding you are initiating. If you are simultaneously filing more than one type of proceeding against the same opposing party, such as a modification and an enforcement proceeding, complete a separate cover sheet for each action being filed. **If you are reopening a case, choose one of the three options below it.**

Initial Action/Petition  
Reopening Case  
    Modification/Supplemental Petition  
    Motion for Civil Contempt/Enforcement  
    Other

Type of Case. If the case fits more than one type of case, select the most definitive.

Simplified Dissolution of Marriage  
Dissolution of Marriage  
Injunction – Domestic Violence  
Injunction – Dating Violence  
Injunction – Repeat Violence  
Injunction – Sexual Violence  
Injunction – Stalking  
Support IV-D (Department of Revenue, Child Support Enforcement)  
Support Non-IV-D (**not** Department of Revenue, Child Support Enforcement)  
UIFSA IV-D (Department of Revenue, Child Support Enforcement)  
UIFSA Non-IV-D (**not** Department of Revenue, Child Support Enforcement)  
Other Family Court  
Adoption Arising out of Chapter 63  
Name Change  
Paternity/Disestablishment of Paternity  
Juvenile Delinquency  
Juvenile Dependency  
Shelter Petition  
Termination of Parental Rights Arising Out of Chapter 39  
Adoption Arising Out of Chapter 39  
CINS/FINS

**FAMILY COURT COVER SHEET**

**Page 2**

**CASE NUMBER: 05 - - - - XXXX-XX**

Rule of Judicial Administration 2.545(d) requires that a Notice of Related Cases Form, Family Law Form 12.900(h), be filed with the initial pleading/petition by the filing attorney or self-represented litigant in order to notify the Court of related cases. Is Form 12.900(h) being filed with this Cover Sheet for Family Court Cases and initial pleading/petition?

No, to the best of my knowledge, no related cases exist.

Yes, all related cases are listed on Family Law Form 12.900(h)

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief.

\_\_\_\_\_  
Signature (Attorney or Party)

\_\_\_\_\_  
FL Bar No. (Bar number if attorney)

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Date

**IF A NON-LAWYER 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 non-lawyer} \_\_\_\_\_,  
a non-lawyer, whose address {street} \_\_\_\_\_,  
{city} \_\_\_\_\_, {state} \_\_\_\_\_ {phone} \_\_\_\_\_,  
helped {name} \_\_\_\_\_, who is the [choose **one** only]  
Petitioner or Respondent, fill out this form.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

Division: \_\_\_\_\_

\_\_\_\_\_  
Petitioner,

and

\_\_\_\_\_  
Respondent.

## REQUEST FOR CONFIDENTIAL FILING OF ADDRESS

I, {full legal name} \_\_\_\_\_, request that the Court  
maintain and hold as confidential, the following address:

Address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (area code and number) \_\_\_\_\_

This request is being made for the purpose of keeping the location of my residence unknown for safety reasons pursuant to section 119.071(2)(j)1, section 741.30(3)(b)(a), section 784.046(4)(b)1, and section 784.0485(3)(b)1, Florida Statutes, or other statutory provision providing for the separate confidential filing for safety reasons.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

### CLERK'S CERTIFICATE AS TO REQUEST FOR CONFIDENTIAL FILING OF ADDRESS

I, \_\_\_\_\_, as Clerk of the Circuit Court, do hereby certify that I  
received and filed the above and will keep the above address confidential, subsequent to further order  
of the Court relative to such confidentiality.

CLERK OF THE CIRCUIT COURT

(SEAL)

By: \_\_\_\_\_  
{Deputy Clerk}

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

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

Division: \_\_\_\_\_

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

\_\_\_\_\_  
Respondent.

### NOTICE OF RELATED CASES

1. Petitioner submits this Notice of Related Cases as required by Florida Rule of Judicial Administration 2.545(d). A related case may be an open or closed civil, criminal, guardianship, domestic violence, juvenile delinquency, juvenile dependency, or domestic relations case. A case is "related" to this family law case if it involves any of the same parties, children, or issues and it is pending at the time the party files a family case; if it affects the court's jurisdiction to proceed; if an order in the related case may conflict with an order on the same issues in the new case; or if an order in the new case may conflict with an order in the earlier litigation.

[check **one** only]

☐ **There are no related cases.**

☐ **The following are the related cases (add additional pages if necessary):**

#### Related Case No. 1

Case Name(s): \_\_\_\_\_

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

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

Type of Proceeding: [check **all** that apply]

☐ Dissolution of Marriage

☐ Custody

☐ Child Support

☐ Juvenile Dependency

☐ Termination of Parental Rights

☐ Domestic/Sexual/Dating/Repeat

Violence or Stalking Injunctions

☐ Paternity

☐ Adoption

☐ Modification/Enforcement/Contempt Proceedings

☐ Juvenile Delinquency

☐ Criminal

☐ Mental Health

☐ Other {specify} \_\_\_\_\_

State where case was decided or is pending: \_\_\_\_ Florida \_\_\_\_ Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases check **all** that apply]:

\_\_\_\_ pending case involves same parties, children, or issues;

\_\_\_\_ may affect court's jurisdiction;

\_\_\_\_ order in related case may conflict with an order in this case;

\_\_\_\_ order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_

\_\_\_\_\_

#### **Related Case No. 2**

Case Name(s): \_\_\_\_\_

Petitioner \_\_\_\_\_

Respondent \_\_\_\_\_

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

Type of Proceeding: [check **all** that apply]

\_\_\_\_ Dissolution of Marriage

\_\_\_\_ Paternity

\_\_\_\_ Custody

\_\_\_\_ Adoption

\_\_\_\_ Child Support

\_\_\_\_ Modification/Enforcement/Contempt Proceedings

\_\_\_\_ Juvenile Dependency

\_\_\_\_ Juvenile Delinquency

\_\_\_\_ Termination of Parental Rights

\_\_\_\_ Criminal

\_\_\_\_ Domestic/Sexual/Dating/Repeat

\_\_\_\_ Mental Health

Violence or Stalking Injunctions

\_\_\_\_ Other {specify} \_\_\_\_\_

State where case was decided or is pending: \_\_\_\_ Florida \_\_\_\_ Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases check all that apply]:

\_\_\_\_ pending case involves same parties, children, or issues;

- ☐ may affect court's jurisdiction;  
☐ order in related case may conflict with an order in this case;  
☐ order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Related Case No. 3**

Case Name(s): \_\_\_\_\_  
 Petitioner \_\_\_\_\_  
 Respondent \_\_\_\_\_  
 Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

- |   |  |
|---|--|
| <input type="checkbox"/> Dissolution of Marriage          | <input type="checkbox"/> Paternity                                     |
| <input type="checkbox"/> Custody                          | <input type="checkbox"/> Adoption                                      |
| <input type="checkbox"/> Child Support                    | <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings |
| <input type="checkbox"/> Juvenile Dependency              | <input type="checkbox"/> Juvenile Delinquency                          |
| <input type="checkbox"/> Termination of Parental Rights   | <input type="checkbox"/> Criminal                                      |
| <input type="checkbox"/> Domestic/Sexual/Dating/Repeat    | <input type="checkbox"/> Mental Health                                 |
| <input type="checkbox"/> Violence or Stalking Injunctions | <input type="checkbox"/> Other {specify} _____                         |

State where case was decided or is pending: ☐ Florida ☐ Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases check all that apply]:

- ☐ pending case involves same parties, children, or issues;  
☐ may affect court's jurisdiction;  
☐ order in related case may conflict with an order in this case;  
☐ order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. [check **one** only]

☐ I **do not** request coordination of litigation in any of the cases listed above.

\_\_\_\_ I **do** request coordination of the following cases: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. [check **all** that apply]

\_\_\_\_ Assignment to one judge

\_\_\_\_ Coordination of existing cases

will conserve judicial resources and promote an efficient determination of these cases  
because:\_\_\_\_\_.

4. The Petitioner acknowledges a continuing duty to inform the court of any cases in this or any other state that could affect the current proceeding.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Petitioner's Signature

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

## CERTIFICATE OF SERVICE

I **CERTIFY** that I delivered a copy of this Notice of Related Cases to the \_\_\_\_\_ County Sheriff's Department or a certified process server for service on the Respondent, and [**check all used**]  
( ) e-mailed ( ) mailed ( ) hand delivered, a copy to {name}\_\_\_\_\_, who is the  
[**check all that apply**] ( ) judge assigned to new case, ( ) chief judge or family law administrative  
judge, ( ) {name}\_\_\_\_\_ a party to the related case, ( ) {name}  
\_\_\_\_\_, a party to the related case on {date}\_\_\_\_\_.

\_\_\_\_\_  
Signature of Petitioner/Attorney for Petitioner

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

Florida Bar Number: \_\_\_\_\_

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:**

[fill in **all** blanks] This form was prepared for the {choose **only one**}: (    ) Petitioner (    ) Respondent.

This form was completed with the assistance of:

{name of individual} \_\_\_\_\_,

{name of business} \_\_\_\_\_,

{address} \_\_\_\_\_,

{city} \_\_\_\_\_ {state} \_\_\_\_\_, {telephone number} \_\_\_\_\_.



**IN THE CIRCUIT COURT, EIGHTEENTH JUDICIAL CIRCUIT,  
IN AND FOR BREVARD COUNTY, FLORIDA**

**DIVISION: FAMILY**

**CASE NUMBER: 05 - - - -XXXX-XX**

**PETITIONER**

***CLOCK IN***

**and**

**RESPONDENT**

**PETITIONER'S WAIVER OR NON-WAIVER OF RETURN HEARING**

I, \_\_\_\_\_, the petitioner herein, have filed a Petition for Injunction for Protection Against Domestic Violence Dating Violence Repeat Violence Sexual Violence or Stalking Violence. I understand that, after reviewing the Petition, the court may;

- a) Issue a temporary injunction and set the case for hearing with notice to the Respondent, or
- b) Not issue a temporary injunction and set the case for hearing with notice to the Respondent, or
- c) Deny the temporary injunction and not set the case for hearing

**Petitioner, initial either Paragraph A or B below:**

\_\_\_\_\_ A. If the court does **not** issue a temporary injunction for protection, I do not object to a hearing being set and understand that notice of the hearing and a copy of the Petition for Injunction will be provided to the Respondent.

OR

\_\_\_\_\_ B. If the court does **not** issue a temporary injunction for protection, I am voluntarily requesting that a hearing **NOT** be set. I do **NOT** want the Respondent to be served with a notice of hearing or a copy of the Petition for Injunction without a temporary injunction for protection in place. I understand that the Judge will enter an order denying the temporary injunction instead of an order setting it for a hearing. I further understand that nothing herein affects my right to amend my petition.

I have signed this waiver or non-waiver freely and voluntarily.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

Printed Name: \_\_\_\_\_

**IN THE CIRCUIT COURT, EIGHTEENTH JUDICIAL CIRCUIT, IN AND FOR  
BREVARD COUNTY, FLORIDA**

**CASE NUMBER: 05-20\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_-XXXX-XX**

**Division : Family**

\_\_\_\_\_  
**Petitioner**

**vs.**

\_\_\_\_\_  
**Respondent**

**DESIGNEE AUTHORIZATION**

\_\_\_\_\_, hereby authorize \_\_\_\_\_ to  
(petitioner) (name of designee)

to pick up copies of documents related to this case.

This authorization is valid for 10 days from \_\_\_\_\_.

\_\_\_\_\_  
Petitioner's Signature

IN THE COURT FOR THE EIGHTEENTH JUDICIAL  
CIRCUIT IN AND FOR BREVARD COUNTY, FLORIDA

CASE NO.: 05- - - XXX-XX

\_\_\_\_\_,  
Petitioner/Plaintiff,

vs

\_\_\_\_\_,  
Respondent/Defendant,

**NON-ATTORNEY DESIGNATION OF EMAIL ADDRESS**

Pursuant to Florida Rules of Judicial Administration 2.516, I, \_\_\_\_\_,  
\_\_\_\_\_, designate the below email address(es) for electronic service of all  
documents related to this case.

Primary email address: \_\_\_\_\_

Secondary email address: \_\_\_\_\_

I certify that a copy of the foregoing has been furnished, if applicable, to the following at the  
address listed:

\_\_\_\_\_  
By ( ) US Mail ( ) Email ( ) Hand delivery

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
City/State/Zip Code

\_\_\_\_\_  
Telephone Number

**IN THE CIRCUIT COURT IN THE EIGHTEENTH JUDICIAL CIRCUIT,  
IN AND FOR BREVARD COUNTY, FLORIDA**

**DIVISION: FAMILY**

**Case No.: 05 - - - XXXX-XX**

***Clock In***

**PETITIONER** (name/child name/street/city/state/zip)

**RESPONDENT** (name/name/street/city/state/zip)

---

---

---

---

---

---

---

---

**PETITION FOR INJUNCTION FOR PROTECTION AGAINST SEXUAL VIOLENCE**

I, {full legal name} \_\_\_\_\_, being sworn, certify that the following statements are true:

**SECTION I. PETITIONER** (This section is about you. It must be completed. However, **if you fear that disclosing your address to the respondent would put you in danger**, you should complete and file a **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h), and write "confidential" in the space provided on this form for your address).

1. Petitioner currently lives at: {street address} \_\_\_\_\_  
{city, state, zip code} \_\_\_\_\_  
Telephone Number: {area code and number} \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

(check if applies)

\_\_\_\_\_ **Petitioner seeks an injunction for protection on behalf of a minor child.** Petitioner is the parent or legal guardian of {full legal name} \_\_\_\_\_, a minor child who is living at home.

2. Petitioner's attorney's name, address, telephone number, and e-mail address is:

---

Attorney's Name

---

Attorney's Address

---

Attorney's Phone Number Attorney's E-Mail Address

None (If you do not have an attorney, check "none")

**SECTION II. RESPONDENT** (This section is about the person you want to be protected from. It must be completed.)

1. Respondent currently lives at: {street address} \_\_\_\_\_  
{city, state, zip code} \_\_\_\_\_  
Respondent's Driver's License Number is: {if known} \_\_\_\_\_

**PETITION FOR INJUNCTION FOR PROTECTION AGAINST SEXUAL VIOLENCE**

**Page 2**

**Case No.: 05 - - - - XXXX-XX**

2. Does the respondent live within 500 feet of your residence?      Yes      No
3. Respondent's last known place of employment: \_\_\_\_\_  
Employment Address: \_\_\_\_\_  
Working Hours: \_\_\_\_\_  
                         Monday      Tuesday      Wednesday      Thursday      Friday      Saturday      Sunday
4. Physical description of Respondent:  
Race: \_\_\_\_\_ Sex:      Male      Female      Date of Birth: \_\_\_\_\_  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_  
Distinguishing marks or scars: \_\_\_\_\_  
Vehicle: {make/model} \_\_\_\_\_ Color: \_\_\_\_\_ Tag Number: \_\_\_\_\_
5. Other names Respondent goes by {aliases or nicknames}: \_\_\_\_\_
6. Respondent's attorney's name, address, telephone number, and e-mail address is:  
\_\_\_\_\_  
Attorney's Name  
\_\_\_\_\_  
Attorney's Address  
\_\_\_\_\_  
Attorney's Phone Number      Attorney's E-Mail Address
- (If you do not know whether Respondent has an attorney, check "unknown". If Respondent does not have an attorney, check "none".)      Unknown      None
7. If the Respondent is a minor, the address of Respondent's parent or legal guardian is:  
\_\_\_\_\_

**SECTION III. CASE HISTORY AND REASON FOR SEEKING PETITION** (This section must be completed.)

1. Petitioner has suffered sexual violence as shown by the fact that the Respondent has:  
*{describe the facts of violence}*
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Check here if you are attaching additional pages to continue these facts.

**PETITION FOR INJUNCTION FOR PROTECTION AGAINST SEXUAL VIOLENCE**

Page 3

Case No.: 05 - - - - XXXX-XX

[Check all that apply]

- a. Petitioner reported the sexual violence to law enforcement and is cooperating in any criminal proceeding. The incident report number by law enforcement is:\_\_\_\_\_.  
{If there is a criminal case, include case number if known} \_\_\_\_\_.
- b. Respondent was sent to prison for committing sexual violence against Petitioner or Petitioner's minor child living at home and Respondent is out of prison or is getting out of prison within 90 days. The notice of inmate release is attached.
2. Has Petitioner ever received or tried to get an injunction for protection against domestic violence, dating violence, repeat violence, stalking violence, or sexual violence against Respondent in this or any other court?      Yes      No      If yes, what happened in that case? {include case number, if known}:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Has Respondent ever received or tried to get an injunction for protection against domestic violence, dating violence, repeat violence, stalking violence, or sexual violence against Petitioner in this or any other court?  
Yes      No      If yes, what happened in that case? {include case number, if known}  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Describe **any other** court case that is either going on now or that happened in the past between **Petitioner and Respondent** {include case number, if known}:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Additional Information  
[Check all that apply]
  - a. Respondent owns, has, and/or is known to have guns or other weapons.  
Describe weapon(s):  
\_\_\_\_\_
  - b. This or prior acts of violence have been previously reported to {person or agency}:  
\_\_\_\_\_  
\_\_\_\_\_

**PETITION FOR INJUNCTION FOR PROTECTION AGAINST SEXUAL VIOLENCE**

Page 4

Case No.: 05 - - - - XXXX-XX

**SECTION IV. INJUNCTION** (This section must be completed.)

1. Petitioner asks the Court to enter a TEMPORARY INJUNCTION for protection against sexual violence that will be in place from now until the scheduled hearing in this matter.
2. Petitioner asks the Court to enter an injunction prohibiting Respondent from committing any acts of violence against Petitioner and:
  - a. prohibiting Respondent from going to or within 500 feet of any place Petitioner lives;
  - b. prohibiting Respondent from going to or within 500 feet of Petitioner's place(s) of employment or the school that the Petitioner attends; the address of Petitioner's place(s) of employment and/or school is:  

---

---
  - c. prohibiting Respondent from contacting Petitioner by telephone, mail, by e-mail, in writing, through another person, or in any other manner.
  - d. ordering Respondent not to use or possess any guns or firearms.

[Check all that apply]

- e. prohibiting Respondent from going to or within 500 feet of the following place(s) Petitioner or Petitioner's immediate family must go to often:  

---

---
- f. prohibiting Respondent from knowingly and intentionally going to or within 100 feet of Petitioner's motor vehicle;

AND any other terms the Court deems necessary for the safety of Petitioner's and Petitioner's immediate family.

---

---

---

---

---

---

---

---

---

---

**PETITION FOR INJUNCTION FOR PROTECTION AGAINST SEXUAL VIOLENCE**

Page 5

Case No.: 05 - - - - XXXX-XX

I UNDERSTAND THAT BY FILING THIS PETITION, I AM ASKING THE COURT TO HOLD A HEARING ON THIS PETITION, NOTIFICATION OF RESPONDENT OF THE HEARING DATE WILL BE THROUGH SERVICE BY LAW ENFORCEMENT. I OR MY DESIGNEE WILL RETURN TO THE CLERK'S OFFICE TO RETRIEVE A CERTIFIED COPY OF THE JUDGE'S ORDER, AND THAT I MUST APPEAR AT THE HEARING. I UNDERSTAND THAT IF EITHER RESPONDENT OR I FAIL TO APPEAR AT THE HEARING, WE WILL BE BOUND BY THE TERMS OF ANY INJUNCTION ISSUED AT THAT HEARING.

I UNDERSTAND THAT I AM SWEARING OR AFFIRMING UNDER OATH TO THE TRUTHFULNESS OF THE CLAIMS MADE IN THIS PETITION AND THAT THE PUNISHMENT FOR KNOWINGLY MAKING A FALSE STATEMENT INCLUDES FINES AND/OR IMPRISONMENT.

(MUST BE SIGNED IN THE PRESENCE OF A NOTARY OR DEPUTY CLERK)

\_\_\_\_\_  
(initials)

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Petitioner's Name Printed

\_\_\_\_\_  
Petitioner's Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Petitioner's Phone Number & Fax Number

\_\_\_\_\_  
Petitioner's E-Mail Address

STATE OF FLORIDA  
COUNTY OF BREVARD

Sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

Personally known  
Produced identification  
Type of identification produced \_\_\_\_\_

\_\_\_\_\_  
[Print, type or stamp commissioned  
name of or clerk.]



**IN THE CIRCUIT COURT, EIGHTEENTH JUDICIAL CIRCUIT,  
IN AND FOR BREVARD COUNTY, FLORIDA**

**DIVISION:**

**CASE NUMBER: 05 - - - XXXX-XX**

**SUPPLEMENTAL TO PETITION FOR INJUNCTION**

1. Describe the injuries: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check here if you are attaching additional pages to continue these facts.

2. How long has this type of conduct been going on? \_\_\_\_\_  
3. If you were living separate and apart from the Respondent when this occurred, state when you separated: \_\_\_\_\_.  
4. Where is the Respondent now, if you know? \_\_\_\_\_  
5. Petitioner is 18 years of age?                      Yes                      No

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true to the best of my knowledge and belief.

(MUST BE SIGNED IN THE PRESENCE OF A NOTARY OR DEPUTY CLERK)

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Petitioner's Name Printed

\_\_\_\_\_  
Petitioner's Address

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
Petitioner's Phone Number & Fax Number

\_\_\_\_\_  
Petitioner's E-Mail Address

Sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  
\_\_\_\_\_ who is personally known to me or presented  
\_\_\_\_\_ as identification.

By: \_\_\_\_\_

