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

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

Clock In

_____,
Petitioner
and

_____,
Respondent

AFFIDAVIT REGARDING JUVENILE DEPENDENCY

I, _____, hereby swear that to the best of my knowledge, the minor child(ren) subject to this proceeding is/are not the subject of a juvenile dependency action.

_____
Date

_____
Signature

_____
Name

_____
Address

_____
City State Zip

_____
Telephone {area code and number}

STATE OF FLORIDA
COUNTY OF BREVARD

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____,
by _____.

_____
Signature of Notary Public-State of Florida

_____
Print, type or stamp Commissioned Name

Check one only:
___Personally known ___Produced I.D. Type of I.D. 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 [√ **one** only] _____petitioner **or** _____ respondent, fill out this form.