

### <<Option 1>> Notice of Proceeding to Establish Paternity and Administrative Support Order

<<Recipient Name>> << Recipient Address>>

<< Date>> Child Support Case Number: <<CSECase Number>>

1. We have started a combined proceeding to establish paternity and an administrative support order that may require you to pay child support and/or provide health insurance and noncovered medical expenses for children named below. The name and date of birth of the child(ren) are:

<<Child1Name>> <<Child2Name>> <<Child1DOB>> <<Child2DOB>>

Our records show there is no support order for the child(ren). We have started this proceeding because public assistance has been received for the child(ren) or because the other parent or caregiver has asked for our help in establishing paternity and support. <<Option 8>>

The name of the other parent is <<OtherParentName>>.

<< Option 24>>

- 2. According to our records:
  - A. You are the legal father of <<Child Z Name.>>. <<Child Z1 Name.>>.

#### << Option 10>>

As the legal father you have a legal duty to contribute to the child(ren)'s support. We will not proceed to establish a support order until after we find out if you are the father of <<Child Y, Y1, etc.>>. If you are the father of <<Child Y, Y1, etc.>>, the support order will cover all of the children.

XXXX XXXX

XXXX

B. According to our records paternity has not been established for <<Child Y, Y1, etc>> and the child(ren)'s mother was not married when the child(ren) was conceived or born. You have been named by the mother, <<mother's name>>, as a possible father of the child(ren). The mother's written statement is included with this notice. We will determine in this proceeding if you are the biological and legal father of the child(ren).

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XXXX XXXX

XXXX

#### C. << Option 42>>.

#### << Option 44>>

- 3. After we receive the genetic testing results, we will determine your child support obligations. We will mail you a notice that requires you to submit financial information that is needed to do that. If the genetic test results are equal to or greater than a 99 percent probability of paternity, we will determine support for that child(ren) and the other child(ren) named in paragraph 1. If the genetic test results are less than a 99 percent probability of paternity we will determine your support obligations only for the child(ren) for whom you are already the legal father. We will review the financial affidavits we receive and will use all available, reliable information about your income and the other parent's income to figure the monthly amount you should be required to pay to support the child(ren). If we cannot determine the correct monthly support amount, we may refer the proceeding to the Division of Administrative Hearings for an administrative law judge to conduct a hearing. Otherwise, after we calculate your support obligation based on the child support guidelines, we will mail you a proposed order, which you can contest at an administrative hearing. The proposed order will address paternity, if applicable, and your child support obligations for the children named above in paragraph 1.
- 4. If a support order is established you will may be required to pay child support and/or provide health insurance and payment of noncovered medical expenses for the child(ren), including retroactive child support for up to 24 months before the start of this proceeding.
- 5. If a Final Administrative Support Order is issued, it can be enforced in any way the law allows.
- 6. You must tell us your current mailing address and send us any changes to your mailing address. All proposed and final administrative support orders, notices of hearing, and any other papers will be mailed to you at the address on page one of this notice and we will presume you have received any documents we send you. You must provide us written notice of changes to your address right away. If you do not provide us address changes, you may not receive a notice causing you to miss a deadline and lose your right to ask for a hearing or file an appeal.
- 7. You or the other parent/caregiver may file a civil action in an appropriate circuit court of this state at any time to determine your paternity and/or support obligations, if any. If, within 20 days after you are served with this notice, you file an action in circuit court and serve us with a copy of the petition, this administrative proceeding will end and the action will proceed in circuit court. If you file a petition, you must serve us a copy on us at

ΧΧΧΧ		
XXXX	Deputy Agency Clerk	
XXXX	< <p.o.legaladdress>&gt;</p.o.legaladdress>	
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Only the circuit court has jurisdiction to grant a divorce, resolve a paternity dispute, award alimony, make name changes, or modify or enforce a parenting time plan. If you want a hearing on any of these issues, you must file a petition in circuit court.

A support order from a circuit court that changes the support obligation(s) takes the place of or supersedes a DOR administrative support order. However, any unpaid support due under the administrative order is still owed.

If you choose to file a court action and do not have a lawyer, you can check to see if there is a self-help center in the county courthouse where you live. For availability, locations, forms, and other information go to www.flcourts.org.

8. If you want us to proceed in circuit court to address paternity and/or your support obligation, we must receive a written request by mail within 20 days after you receive this notice at

Florida Department of Revenue Child Support Program <<Local Office Address>>

If we receive your request within that time we will file an action in circuit court to determine your paternity and/or support obligations, if any, after the other parent or caregiver provides a financial affidavit and will mail you a copy of the court petition and a waiver of service form. You must then sign and return the waiver of service form within 10 days after you receive it. Upon receipt of your signed waiver of service form, we will end this administrative proceeding and proceed with the circuit court action. If the waiver of service is not returned, this proceeding will continue. Our petition will only address paternity and support issues. It will not address custody or visitation.

- 9. Call us if you are now in a bankruptcy or Chapter 13 proceeding. Parts of this notice may not apply to you.
- 10. This proceeding is authorized by section 409.256 and 409.2563, Florida Statues.
- 11. If you have any questions call **<<Option 31>>**. Provide address updates to the address below:

Florida Department of Revenue Child Support Program P.O. Box 5330 Tallahassee, FL 32314-5330 Signed and dated this the << Day; 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, etc.>> day of <<Month>>, 20<<YY>>.

XXXX XXXX	< <image ann="" coffin's="" of="" signature=""/> > Director, Child Support Program
XXXX	Authorized Representative
XXXX	Florida Department of Revenue
XXXX	This document has been signed electronically as authorized by section 668.004. Florida Statutes.
XXXX	
XXXX	Enclosures:
XXXX	Paternity Declaration or Affidavit
XXXX	Order to Appear for Genetic Testing
XXXX	
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XXXX	

#### Notice to Non-English Speaking Respondents

The Department of Revenue, Child Support Program (DOR) has begun a legal proceeding to establish paternity or a child support order for the child(ren) named on page one of the enclosed notice. To fully understand your rights and obligations you need to read the enclosed notice or order. If you do not understand English, ask someone you know to help translate the notice or order for you. If you have questions, call <<<COUNTYPHONENUMBER>> for further assistance.

#### Aviso Para Demandados Que No Hablen Inglés

El Ministerio de Hacienda (Department of Revenue) del Estado de la Florida, Programa Para Sustento de Menores, ha iniciado un procedimiento Legal para establecer una orden de paternidad/de sustento para el niño(s) nombrado en la primera página del documento incluido. Para entender sus derechos y obligaciones completamente usted necesita leer el documento y la orden incluida. Si usted no entiende Inglés, pídale a alguien conocido que le ayude a traducir el documento y la orden. Si tiene preguntas adicionales, llame al <<COUNTYPHONENUMBER>>.

#### Mesaj Pou Moun Ki Pa Ka Reponn An Angle

The Department of Revenue, Child Support Program (DOR) komanse aksyon legal pou etabli patenite/yon dekre pou timoun/timoun-yo ki lonmen nan yon paj sou notis ki enfemen a. Pou konprann konpletman tout dwa-ou avek obligasyon-ou, fok ou li notis avek dekre ki enfemen a. Si ou pa konprann Angle, mande yon moun ou konnen pou tradui notis avke dekre-a pou ou. Si ou gen kesyon, rele <<<COUNTYPHONENUMBER>> pou asistans.

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## NOTE: For tag <<InsertWebText2:>> We want the following text to be a condition that FDOR can turn on when the form is available on WSS:

You can complete this form online if you register at <<InsertAppropriateFDORInternetAddr>>.

#### **OPTION 1 (When applicable):**

- A. AMENDED (use in heading only)
- B. Amended

#### **OPTION 8 – Jurisdiction/Long Arm for Parent Who Owes Support/alleged** father

#### A. <u>When served in Florida</u>

DOR has personal jurisdiction over the Respondent because he/she was properly served notice in Florida on <<Date Served With Initial Notice>>.

B. <u>When NCP served in another state or country (long-arm); if 8B is selected, select</u> <u>one or more from 8B1-8B6.</u>

The Respondent is subject to DOR's jurisdiction in this proceeding under sections 48.193(1)(e), (h), or 88.2011, Florida Statutes. The Respondent was properly served notice outside the State of Florida, and he/she

**1.** resided in this state with the child(ren) and/or the Petitioning parent before this proceeding started.

**2.** resided in this state and provided prenatal expenses or support for the child(ren) before this proceeding started.

- 3. maintained a matrimonial domicile in this state before this proceeding started.
- 4. acknowledged paternity of the child(ren) in this state before this proceeding started.

**5.** had sexual intercourse in this state, which may have resulted in conception of the child(ren).

**6.** submitted to the jurisdiction of this state by consent, by entering a general appearance, or by filing a responsive document having the effect of waiving any objection to personal jurisdiction.

# OPTION 10 (One entry for each child.) (A-F on paternity codes associated with individual child BP record. H based on existence of ZGT activity involving the child associated with the paternity activity)

- A. Paternity has been legally established for <<Child Z>> by affidavit or voluntary acknowledgment.
- B. Paternity has been established for <<Child Z>> through a court order issued within the State of Florida.
- **C.** Paternity is presumed for <<Child Z>> because the Respondent was married to the mother when the child was born or conceived.
- D. Paternity has been established for <<Child Z>> in another state by a court, other tribunal, or voluntary acknowledgment.
- E. Paternity is not an issue for <<Child Z>> because the Respondent and the mother married after the child's birth.
- F. Paternity has been established for <<Child Z>> by an administrative order based on a positive genetic test.

- **G.** Paternity is not an issue for <<**Child Z>>** because the Respondent is the child's mother.
- H. Paternity has been established for <<Child Z>> based on the attached genetic test results that equals or exceeds a 99 percent probability of paternity.

#### **OPTION 24 (in caregiver cases only)**

<<CP/CTR Name>> is the child(ren)'s caregiver

#### **OPTION 31 (Based on the office handling the case.)**

#### A. <<COUNTYPHONENUMBER>>

#### **OPTION 42**

#### A. When Alleged Father is being ordered to submit to genetic testing

An Order to Appear for Genetic Testing is enclosed with this notice. You are required by law to submit to genetic testing. Genetic testing will show if you are or are not the biological father of the child(ren). If the results of genetic testing do not prove that you are the father (99 percent or greater probability of paternity), this proceeding will end unless another test is required.

#### B. When we are using a sample that was previously collected

You have already given a sample for genetic testing. Enclosed are the results from that test, which proves that you are the biological father of the child(ren). If you think the test results are wrong, you may have another genetic test by sending a request to us at the address listed at the end of this notice. We must receive your written request within 15 days after the date of this notice and you must pay us in advance for the full cost of the test.

#### **Option 44 (when parenting time indicator on parent activity is Yes)**

Once genetic testing is complete, we will mail you a blank Title IV-D Standard Parenting Time Plan form. If both you and the other parent agree to, sign, and return the form or your own parenting time plan to the Department before an administrative Final Order is entered, the Title IV-D Standard Parenting Time Plan or your own parenting time plan will be made a part of the Final Order. The Department is not authorized to modify or enforce a parenting time plan.