

**FAMILY COURT SERVICES - ROOM 2150  
501 WEST ADAMS STREET, JACKSONVILLE, FL 32202  
(904) 255-1060**

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**CHECKLIST FOR:  
MOTION FOR CIVIL CONTEMPT/ENFORCEMENT**

Use this form to ask the court to enforce a prior court order for the other party who is failing to comply with the court order in your case.

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**INSTRUCTIONS:**

1. Go to [www.flcourts.org](http://www.flcourts.org) - (select) – Self Help, Family Law Forms for the forms.  
**Fully complete** the forms below.
2. Make sure the appropriate forms are **notarized**.
3. After notarizing, make **3 copies** of each form.
4. File your **original documents** with the **Family Law Clerk of Courts Room 2474 - 2<sup>nd</sup> floor**.
5. **NEXT** the (3) copies you made...

- (1) COPY - **YOU KEEP FOR YOURSELF**
- (1) COPY – OTHER PARTY
- (1) COPY – **\*CERTIFIED MAIL WITH A RETURN RECEIPT to:**

**DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT UNIT**

**ATTN: Service Center Manager**

Bldg. A – Room 150

921 N. Davis Street

Jacksonville, FL 32209

**\*ONLY IF DOR/CSE ARE INVOLVED\* Instructions on next page\***

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**ALL FORMS MUST BE COMPLETED TO START YOUR CASE**

- Form 12.960 (Attached)**
  - Motion for Civil Contempt/Enforcement
  
- Form 12.900(h) (Must be Filed)**
  - Notice of Related Cases
  
- PRINTOUT of your ‘Pay History’ from the Domestic Relations Depository (DRD) (1<sup>st</sup> Floor-Room 1053)**  
**\*\*Only if your Motion is regarding child support matters \*\***

## HOW TO NOTIFY BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Make sure you obtain the following with your form and follow instructions:

- (1) Envelope
- (1) 'Green Card' for certified mail
- (1) 'White Receipt' for return receipt requested
- Local Form
  - \*Notice of Service to Department of Revenue/Child Support Enforcement (DOR/CSE)**

### INSTRUCTIONS:

1. Go to the nearest U.S. Post Office with your envelope with attached green card and receipt.
2. After the copy of your motion has been delivered to DOR/CSE, the Post Office will send you back the 'Green Card' to inform you that it was received.
3. Attach this green card along with the local form and file it with the Clerk of the Courts, Family Law, Room 2474



IN THE CIRCUIT COURT OF THE FOURTH JUDICIAL CIRCUIT,  
IN AND FOR DUVAL COUNTY, FLORIDA

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

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

and

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

**MOTION FOR CIVIL CONTEMPT/ENFORCEMENT**

\_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent requests that the Court enter an order of civil contempt/enforcement against \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent in this case because:

1. A final judgment or order *{title of final judgment or order}* \_\_\_\_\_  
in this case was entered on *{date}* \_\_\_\_\_, by *{court, city, and state}* \_\_\_\_\_

\_\_\_\_\_ Please indicate here if the judgment or order is not from this Court and attach a copy.

2. This order of the Court required the other party in this case to do or not do the following:  
*{Explain what the other party was ordered to do or not do.}* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Please indicate here if additional pages are attached.

3. The other party in this case has willfully failed to comply with this order of the Court: *{Explain what the other party has or has not done.}* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Please indicate here if additional pages are attached.

4. I respectfully request that the Court issue an order holding the above-named person in civil contempt, if appropriate, and/or providing the following relief:
- a. \_\_\_\_\_ enforcing or compelling compliance with the prior order or judgment;
  - b. \_\_\_\_\_ awarding a monetary judgment;
  - c. \_\_\_\_\_ if a monetary judgment was included in the prior order, issuing a writ of execution or garnishment or other appropriate process;
  - d. \_\_\_\_\_ awarding prejudgment interest;
  - e. \_\_\_\_\_ requiring the other party to pay costs and fees in connection with this motion;
  - f. \_\_\_\_\_ if the other party is found to be in civil contempt, ordering a compensatory fine;
  - g. \_\_\_\_\_ if the other party is found to be in civil contempt, ordering a coercive fine;
  - h. \_\_\_\_\_ if the other party is found to be in civil contempt, ordering incarceration of the other party with a purge;
  - i. \_\_\_\_\_ issuing a writ of possession for real property, writ for possession of personal property, or other appropriate writ;
  - j. \_\_\_\_\_ issuing a writ of bodily attachment if the other party fails to appear at the hearing set on this motion;
  - k. \_\_\_\_\_ requiring the other party to make payments through the central governmental depository;
  - l. \_\_\_\_\_ requiring the support payments to be automatically deducted from the other party's income or funds;
  - m. \_\_\_\_\_ requiring the other party to seek employment;
  - n. \_\_\_\_\_ awarding make-up time-sharing with minor child(ren) as follows {explain}: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - o. \_\_\_\_\_ awarding other relief {explain}: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that a copy of this document was ( ) mailed ( ) faxed and mailed ( ) e-mailed ( ) hand-delivered to the person(s) listed below on {date} \_\_\_\_\_.

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

Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

**I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this motion and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

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

\_\_\_\_\_  
Signature of Party or his/her attorney  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on \_\_\_\_\_ by \_\_\_\_\_.

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

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

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

**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} \_\_\_\_\_, {zip code} \_\_\_\_\_ {telephone number} \_\_\_\_\_.