Affordable Documents, Inc.

Post Office Box 96 ~ Mascotte, Florida 34753 Phone: 352-429-7875 ~ Fax: 352-429-0466 Email: affparalegal@aol.com

Thank you for your call regarding your support/custody matters. Enclosed you will find the questionnaire regarding custody/support modification. Once completed, please return along with payment and your paperwork will be immediately processed. If you have any questions please feel free to call. Thanks again for your interest in Affordable Documents, Inc. Sincerely,

Vicki L. Smith Preparer / Owner

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STATEMENT

Custody/Child Support Modification.....\$250.00*

* This does not include any filing fees.

Thank you for your patronage.

Affordable Documents, Inc.

Service Disclosure and Liability Agreement

- 1. I, the customer, understand and agree that Affordable Documents, Inc. hereinafter referred to as A.D.I. are not licensed attorneys and do not practice law in the State of Florida.
- 2. I understand that A.D.I. may not, will not, and cannot provide me with: legal advice, representation in a court of law, a description of what my rights or remedies are, or tell me how to testify in court.
- 3. I hereby affirm and declare that I have not received from A.D.I. or any person in it's employ any legal advice whatsoever; any verbal or written answers as to how to complete the Child Support/Custody/Visitation Modification Questionnaire.
- 4. I hereby affirm and declare that A.D.I. has not engaged in any fraudulent, unfair, or deceptive conduct and has prepared the same according to my specific instructions, strictly with the information I provided A.D.I. within this Child Support/Custody/Visitation Modification Questionnaire.
- 5. I understand and agree that any word processing or typing service errors made by A.D.I. will be corrected by A.D.I. at no charge. My acceptance of the completed documents prepared by A.D.I. indicates my approval of the contents therein.
- 6. I understand and agree that any balance due from work performed by A.D.I. is to be paid in full and no documents will be released until said balance is paid.
- 7. I understand and agree that A.D.I. will not be held responsible for any completed documents that are lost or stolen.
- 8. I understand and agree that A.D.I. assumes no liability resulting from my use of any misleading, deceptive, ambiguous, and/or fraudulent information received from me, which is subsequently incorporated into any document I have instructed A.D.I. to prepare for my filing within a court of law.
- 9. I, the customer hereby direct A.D.I. to type my Child Support/Custody/Visitation Modification documents from the data received from the following numbered questions. This is a service that A.D.I. offers to the public at-large, and I hereby acknowledge and affirm that I have read the foregoing statements 1 through 9 in full, and that I understand and agree with same, as evidenced by my signature below.

Customer's Signature:	
Date:	

CHILD SUPPORT AND CUSTODY/VISITATION MODIFICATION INFORMATION SHEET

Petitioner's name:	
Petitioner's address:	
Petitioner's phone:	
Petitioner's social security number:	
Petitioner is the Former Husband F	ormer Wife
Former Wife/Husband's name:	
Former Wife/Husband's address:	
Date of Final Judgment of Dissolution of Marriag	ge:
Case No.:	
Child support amount: \$	weekly monthly
Date child support began:	Income deduction order?Yes No
PLEASE ATTACH COPIES OF ANY (IMPOR	
CHILD SUPPORT MODIFICATION	
Please explain the substantial change in circumsta	ances requiring a modification in child support:

Please explain how you would like child support to be modified:		
Please explain how this is in the best interest of the child:		
CUSTODY / VISITATION MODIFICATION		
Please explain the substantial change in circumstances requiring a modification in		
custody/visitation:		
Please explain how you would like the custody/visitation to be modified:		
Please explain how this is in the best interest of the child:		

PARENTING PLAN ISSUES: (if you do not wish to have it included or changed, please leave blank)

PARENTAL RESPONSIBILITY AND DECISION MAKING

The child(ren	currently reside with [] Mother [] Father [] Other (please explain)
Parental Res	ponsibility (Choose only one)
[]	Shared Parental Responsibility. It is in the best interests of the child(ren) that the parents confer and jointly make all major decisions affecting the welfare of the child(ren). Major decisions include, but are not limited to, decisions about the child(ren)'s education, healthcare, and other responsibilities unique to this family.
OR	response made to the running.
[]	Shared Parental Responsibility with Decision Making Authority It is in the best interests of the child(ren) that the parents confer and attempt to agree on the major decisions involving the child(ren). If the parents are unable to agree, the authority for making major decisions regarding the child(ren) shall be as follows:
	Education/Academic decisions [] Mother [] Father Non-emergency health care [] Mother [] Father
OR	
[]	Sole Parental Responsibility: It is in the best interests of the child(ren) that the [] Mother [] Father shall have sole authority to make major decisions for the child(ren.)
Extra-curric	ular Activities (Choose all that apply)
[]	Either parent may register the child(ren) and allow them to participate in the activity of the child(ren)'s choice.
[]	The parents must mutually agree to all extra-curricular activities.
[]	The parent with the minor child(ren) shall transport the minor child(ren) to and/or from all mutually agreed upon extra-curricular activities, providing all necessary uniforms and equipment within the parent's possession.
[]	The costs of the extra-curricular activities shall be paid by: Mother% Father%
[]	The uniforms and equipment required for the extra-curricular activities shall be paid by: Mother % Father %

[] Other:
SCHEDULING
School Calendar If necessary, on or before of each year, both parents should obtain a copy o the school calendar for the next school year. The parents shall discuss the calendars and the time-sharing schedule so that any differences or questions can be resolved.
The parents shall follow the school calendar of: (Choose all that apply) [] the oldest child [] the youngest child [] the school calendar for County [] the school calendar for School
Academic Break Definition When defining academic break periods, the period shall begin at the end of the last scheduled day of classes before the holiday or break and shall start on the first day of regularly scheduled classes after the holiday or break.
Schedule Changes (Choose all that apply)
A parent making a request for a schedule change will make the request as soon as possible, but in any event, except in cases of emergency, no less than before the change is to occur.
[] A parent requesting a change of schedule shall be responsible for any additional child care, or transportation costs caused by the change.
[] Other
TIME-SHARING SCHEDULE
Weekday and Weekend Schedule
The child(ren) shall spend time with the Mother on the following dates and times: WEEKENDS: [] Every [] Every Other [] Other (specify) From
The child(ren) shall spend time with the Father on the following dates and times: WEEKENDS: [] Every [] Every Other [] Other (specify) From to WEEKDAYS: Specify days From to OTHER: (Specify)

[] T	here is a differen	t time-sharing so	chedule for the f	following child(re	en) in Attachment
					·
	(Name of Chil	d)	(Na	me of Child)	
Holid	lay Schedule (Ch	noose only one)			
[]	No holiday time sharing shall apply. The regular time-sharing schedule set forth above shall apply.				
[]	Holiday time-sharing shall be as the parties agree.				
[]	Holiday time-sharing shall be in accordance with the following schedule. The Holid schedule will take priority over the regular weekday, weekend, and summer schedule Fill in the blanks with Mother or Father to indicate where the child(ren) will be for the holidays. Provide the beginning and ending times. If a holiday is not specified as ever odd, or every year with one parent, then the child(ren) will remain with the parent in accordance with the regular schedule				
Holidays Mother's Day Father's day President's Day Martin Luther King Day Easter Passover Memorial Day Weekend 4th of July Labor Day Weekend Columbus Day Weekend Halloween Thanksgiving Veteran's Day Hanukkah Yom Kippur Rosh Hashanah Child(ren)'s Birthdays		Even Years	Odd Years	Every Year	Begin/End Time

This holiday schedule may affect the regular Time-Sharing Schedule. Parents may wish to specify one or more of the following options:

[]	When the parents are using an alternating weekend plan and the holiday schedule would result in one parent having the child(ren) for three weekends in a row, the parents will exchange the following weekend, so that each has two weekends in a row before the regular alternating weekend pattern resumes.
[]	If a parent has the child(ren) on a weekend immediately before or after an unspecified holiday or non-school day, they shall have the child(ren) for the holiday or non-school day.
V	Vinte	Break
E	intire `	Winter Break (Choose only one)
[]	The [] Mother [] Father shall have the child(ren) from the day and time school is dismissed until December at a.m./p. m in []odd-numbered years [] even-numbered years [] every year. The other parent will have the children for the second portion of the Winter Break. The parties shall alternative the arrangement each year.
[]	The [] Mother [] Father shall have the child(ren) for the entire Winter Break during [] odd-numbered years [] even-numbered years [] every year.
[]	Other:
		·
S	pecifi	c Winter Holidays
		ddressed above, the specific Winter Holidays such as Christmas, New Year's Eve, cah, Kwanzaa, etc. and shall be shared as follows:
S	pring	Break (Choose only one)
[]	The parents shall follow the regular schedule.
[]	The parents shall alternate the entire Spring Break with the Mother having the child(ren) during the []odd-numbered years []even numbered years.
[]	The [] Father [] Mother shall have the child(ren) for the entire Spring Break every year.
[]	The Spring Break will be evenly divided. The first half of the spring Break will go to the parent whose regularly scheduled weekend falls on the first half and the second half going to the parent whose weekend falls during the second half.
[]	Other:

Summer Break (Choose only one)

[]	The parents shall follow the regular schedule through the summer.
[]	The [] Mother [] Father shall have the entire Summer Break from after school is out until before school starts.
]]	The parents shall equally divide the Summer Break. During [] odd-numbered years [] even numbered years, the [] Mother [] Father shall have the children from after school is out until The other parent shall have the child(ren) for the second one-half of the summer break. The parents shall alternate the first and second one-halves each year unless otherwise agreed. During the extended periods of time-sharing, the other parent shall have the child(ren)
]]	Other:
		f not set forth above , the parties shall have time-sharing in accordance with the schedule is attached and incorporated herein.
TRANSI	POR	TATION AND EXCHANGE OF CHILD(REN)
7	ran	sportation (Choose only one)
[]	The [] Mother [] Father shall provide all transportation.
[]	The parent beginning their time-sharing shall provide transportation for the child(ren).
[]	The parent ending their time-sharing shall provide transportation for the child(ren).
[]	Other:
I	Exch	ange (Choose only one)
	at	oth parents shall have the child(ren) ready on time with sufficient clothing packed and ready the agreed upon time of exchange. If a parent is more than minutes late without ontacting the other parent to make other arrangements, the parent with the child(ren) may roceed with other plans and activities.
[]	Exchanges shall be at Mother's and Father's homes unless both parents agree to a different meeting place.
[]	Exchanges shall occur atunless both parties agree in advance to a different meeting place.
[]	Other:
T	ran	sportation Costs (Choose only one)
[]	Transportation costs are included in the Child Support Worksheets and/or the Order for Child Support and should not be included here.

[]	The Mother shall pay% and the Father shall pay % of the transportation costs.
[]	Other:
Fore	ign and Out-Of-State Travel (Choose only one)
[]	Either parent may travel with the child(ren) during his/her time-sharing. The parent traveling with the child(ren) shall give the other parent at least days written notice before traveling out of state unless there is an emergency, and shall provide the other parent with a detailed itinerary, including locations and telephone numbers where the child(ren) and parent can be reached at least days before traveling.
[]	Either parent may travel out of the country with the child(ren) during his/her time-sharing. At least days prior to traveling, the parent shall provide a detailed itinerary, including locations, and telephone numbers where the child(ren) and parent may be reached during the trip. Each parent agrees to provide whatever documentation is necessary for the other parent to take the child(ren) out of the country.
[]	If a parent wishes to travel out of the country with the child(ren), he/she shall provide the following security for the return of the child
[]	Other
EDUCATIO	N
	ol designation. For purposes of school boundary determination and ration, the [] Mother's [] Father's address shall be designated.
(If A _I	pplicable) The following provisions are made regarding private or home schooling:
Othe	er
DESIGNATI	ON FOR OTHER LEGAL PURPOSES
the [] N federa	hild(ren) named in this Parenting Plan are scheduled to reside the majority of the time with Mother [] Father. This majority designation is SOLELY for purposes of all other state and al laws which require such a designation. This designation does not affect either parent's and responsibilities under this parenting plan.
COMMUNIC	CATION

Between Parents

All communications regarding the child(ren) shall be between the parents. The parents shall not use the child(ren) as messengers to convey information, ask questions, or set up schedule changes. The parents shall communicate with each other by: (Choose all that apply) in person [] by telephone by letter [] [] by e-mail Other: [] **Between Parent and Child(ren)** Both parents shall keep contact information current. Telephone or other electronic communication between the child(ren) and the other parent shall not be monitored by or interrupted by the other parent. "Electronic communication" includes telephones, electronic mail or e-mail, webcams, video-conferencing equipment and software or other wired or wireless technologies or other means of communication to supplement face to face contact. The child(ren) may have [] telephone [] e-mail [] other electronic communication in the form of _____ with the other parent: (Choose only one) Anytime Every day during the hours of ______ to _____. [] On the following days_____ [] during the hours of ______ to _____. Other: _______. [] **Costs of Electronic Communication** shall be addressed as follows: **CHILD CARE** (Choose only one) Each parent may select appropriate child care providers [] All child care providers must be agreed upon by both parents. Each parent must offer the other parent the opportunity to care for the child(ren) before [] using a child care provider for any period exceeding _____ hours. Other _____

(If you do not wish for the following statement to be included in your paperwork, please mark through it.)

OTHER PROVISIONS

	provider or other person entrusted by the other parent with the care of the child(ren) without the agreement of the other party during the other party's time of parental responsibility or visitation.		
CHII	LD SUPPORT		
1	() Mother () Father will pay child support, under Florida's child support guidelines, section 61.30, Florida Statutes, to the primary residential or sole parent named above.		
2.	Health Insurance. () Mother () Father will maintain health insurance coverage for the parties' minor child(ren). The party providing coverage will provide insurance cards to the other party showing coverage. OR () Health insurance is not reasonably available at this time. Any uninsured/unreimbursed medical costs for the minor child(ren) shall be assessed as follows: a. Shared equally by both parents b. Prorated according to the child support guideline percentages c. Other:		
3.	Dental Insurance. () Mother () Father will maintain dental insurance coverage for the parties' minor child(ren). The party providing coverage will provide insurance cards to the other party showing coverage. OR () Dental Insurance is not reasonably available at this time. Any uninsured/unreimbursed dental costs for the minor child(ren) shall be assessed as follows: a. Shared equally by both parents b. Prorated according to the child support guideline percentages c. Other:		
4.	IRS Income Tax Deduction(s) . The parent granted primary residential responsibility or sole parental responsibility of the parties minor child(ren) shall have the benefit of any tax deduction for the child(ren) or as follows:		
Will	the Former Wife/Husband be willing to sign an Answer, Waiver and Consent agreeing to		
the m	nodification of the child support?		
If not	t, do you wish to have her/him served by personal service (process server/sheriff)?		
Is the	Former Wife/Husband in the military?		

Neither parent shall take the child(ren) from the custody of the other parent or any child care

4.

DISCLOSURE FROM NONLAWYER

VICKI SMITH, told me that she is a nonlawyer and may not give legal advice, cannot tell me what my rights or remedies are, cannot tell me how to testify in court, and cannot represent me in court.

Rule 10-2.1(b) of the Rules Regulating The Florida Bar defines a paralegal as a person who works under the supervision of a member of The Florida Bar and who performs specifically delegated substantive legal work for which a member of The Florida Bar is responsible. Only persons who meet the definition may call themselves paralegals. *VICKI SMITH* informed me that she is not a paralegal and cannot call herself a paralegal.

VICKI SMITH, told me that she may only type the factual information provided by me in writing into the blanks on the form. VICKI SMITH, may not help me fill in the form and may not complete the form for me. If using a form approved by the Supreme Court of Florida, VICKI SMITH, may ask me factual questions to fill in the blanks on the form and may also tell me how to file the form.

$[\sqrt{\text{one only}}]$		
I can read English.		
I cannot read English, but the	is disclosure was read to me by	in
(language).	·	
Dated:		
	Signature of Party	
	Printed Name:	