

IN THE CIRCUIT COURT OF THE TWELFTH JUDICIAL CIRCUIT IN AND FOR SARASOTA COUNTY, FLORIDA

DIVISION:

**SUPPORT**

CASE NUMBER:

PLAINTIFF

VS. DEFENDANT

**AFFIDAVIT TO CREDIT FOR DIRECT SUPPORT PAYMENT(S)**

Under penalty of perjury, the undersigned states as follows:

1. That I am the recipient of support payments ordered to be made by \_\_\_\_\_ through the Local Government Depository, Clerk of the Circuit Court.
2. That he/she has made payment DIRECTLY to me in the amount of \$ \_\_\_\_\_ instead of paying through the Depository.
3. That I request his/her account be credited for the amount of the payments made directly to me.
4. By so requesting, I understand that I may lose my right to enforce collection of the above amount. I also relieve the Support Division of any obligation it may have with regard to the payments made directly to me.

\_\_\_\_\_  
Signature

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Before me personally appeared \_\_\_\_\_, who produced \_\_\_\_\_ as identification, to me well known and known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that she/he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

MY COMMISSIONS EXPIRES:

\_\_\_\_\_  
NOTARY PUBLIC

**RETURN ORIGINAL SIGNED AND NOTARIZED AFFIDAVIT TO:**

**CLERK OF COURT  
SUPPORT/ALIMONY DIVISION  
P.O. BOX 3079  
SARASOTA, FL 34230-3079**

FILED FOR RECORD STAMP

**KAREN E. RUSHING  
CLERK OF THE CIRCUIT COURT**

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**Deputy Clerk**