

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL  
CIRCUIT, IN AND FOR SEMINOLE COUNTY, FLORIDA

CASE NO. \_\_\_\_\_

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

vs.

\_\_\_\_\_,  
Respondent

**AUTHORIZATION FOR CHANGE OF  
ADDRESS AND/OR NAME FOR PURPOSES OF  
CHILD SUPPORT PAYMENTS ONLY**

I hereby authorize the CLERK OF THE CIRCUIT COURT to change my name and/or address to the following:

(PLEASE PRINT)

NAME: \_\_\_\_\_

NEW ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

If the Department Of Revenue (DOR) is involved in your case, you must notify DOR of any change of address. It is not the responsibility of the Clerk of Court.

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

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

\_\_\_\_\_  
Signature of Party

Sworn to (or affirmed) and subscribed before me by means of \_\_\_\_ physical presence or \_\_\_\_ online notarization, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Personally Known\_\_\_\_ OR Produced Identification\_\_\_\_  
Type of Identification Produced\_\_\_\_\_

\_\_\_\_\_  
Notary Public, Deputy Clerk, or other authority

\_\_\_\_\_  
Name of Notary (typed, printed or stamped)