

**IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT,
IN AND FOR OKALOOSA COUNTY, FLORIDA**

ADMINISTRATIVE DIRECTIVE NO: OCAD2023-05

**RE: PROCEDURE FOR UNCONTESTED DISSOLUTION OF MARRIAGE
WITHOUT HEARING BY SPECIAL AFFIDAVIT**

WHEREAS, the Circuit Court in and for Okaloosa County, Florida, established a Family Law Division effective April 1, 1992; and

WHEREAS, Florida Rules of General Practice and Judicial Administration 2.545, provides, in part, “[t]he trial judge shall take charge of all cases at an early stage in the litigation and shall control the progress of the case thereafter until the case is determined”; and

WHEREAS, to accomplish the goals of Florida Rules of General Practice and Judicial Administration 2.545, the prompt and efficient administration of justice requires established, uniform, and defined procedures for the presentation to the Court of a request to enter a Final Judgment of Dissolution of Marriage without a hearing;

WHEREAS, to process and dispose of an uncontested Dissolution of Marriage, with or without children, in a prompt and effective manner, the parties, whether represented or *pro se*, are advised to review paragraph 3 below, titled “Uncontested Dissolution of Marriage With or Without Children; and

WHEREAS, the undersigned is Administrative Judge for Okaloosa County, Florida by Order of the Chief Judge of the First Judicial Circuit, in Administrative Order 2021-16, and upon the authority conferred by Florida Rules of General Practice and Judicial Administration 2.515;

ORDERED AND ADJUDGED:

1. EFFECTIVE DATE: These administrative policies and procedures shall be effective **June 5, 2023**.

2. FORMS: There are three forms attached to this Order:

EXHIBIT A: Notice of Filing Special Affidavit for Uncontested Dissolution Marriage

EXHIBIT B: Special Affidavit for Uncontested Dissolution Marriage with No Hearing

EXHIBIT C: Check List

To ensure prompt and efficient management of these cases, no substantive changes shall be made to the attached forms. Other than filling in the blanks, the forms may not be otherwise changed, altered, or modified. However, minor alterations as to spacing and formatting are excluded from this direction.

3. UNCONTESTED DISSOLUTION OF MARRIAGE WITH OR WITHOUT CHILDREN: In lieu of presenting live testimony, the necessary testimony for an uncontested dissolution of marriage with or without children may be submitted by filing the Notice of Filing Special Affidavit for Uncontested Dissolution Marriage attached hereto as Exhibit “A” and the Special

Administrative Directive No. OCAD2023-05

Copies furnished to:

Honorable John L. Miller, Chief Judge
All Circuit Judges, Family Law Division
Kasey Watson, Trial Court Administrator
Ursula Hall, Court Operations Manager, Okaloosa County
Okaloosa Clerk of Circuit Court
Okaloosa Bar Association
Escambia-Santa Rosa Bar Association
Walton Bar Association
Honorable J.D. Peacock II, Clerk of Circuit Court

EXHIBIT "A"

**IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT
IN AND FOR OKALOOSA COUNTY, FLORIDA**

IN RE: The Marriage of

_____,
Petitioner,

and

Case No. _____

_____,
Respondent.

NOTICE OF FILING AFFIDAVIT FOR UNCONTESTED DISSOLUTION OF MARRIAGE

TO: _____ (Respondent Name)
_____ (Address)
_____ (City, State, Zip)
_____ (E-Mail)

YOU ARE HEREBY NOTIFIED that the undersigned Petitioner/Counter-Petitioner has filed an Affidavit for Uncontested Dissolution of Marriage with the Circuit Court in OKALOOSA County, Florida, a copy of which is attached to this Notice and requests that a Final Judgment of Dissolution of Marriage be entered without a final hearing.

If you disagree with the facts alleged in the attached Special affidavit and/or you desire a hearing before the Court, you must file your objections in writing and file them with the Okaloosa County Clerk of Court, Okaloosa County Courthouse Annex Extension, 1940 Lewis Turner Blvd., Fort Walton Beach, Florida 32547 or the Okaloosa County Clerk of Court, Okaloosa County Courthouse, 101 E. James Lee Blvd., Crestview, FL 32536 by regular via USPS, by hand delivery, or by e-filing.

**OBJECTIONS MUST BE FILED WITHIN TEN (10) DAYS OF THE DATE
OF THIS NOTICE. THIS WILL BE YOUR LAST NOTIFICATION BEFORE THE ENTRY
OF THE FINAL JUDGMENT OF DISSOLUTION OF MARRIAGE
IF NO OBJECTION IS FILED.**

If one or both parties are represented by an attorney, the attorney shall e-file any objection and provide a copy to the other party. If you are not represented by an attorney, you must submit your objection to the Clerk of Court and provide a copy of your objection to the attorney whose name appears below.

If both parties are unrepresented by counsel and acting pro se, any objections must be filed with the Clerk of Court with a copy provided to the other party. Upon filing the objection with the Clerk of Court you must immediately contact the Family Law Case Manager at (850) 651-7700.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing has been furnished by: () regular U.S. mail
() e-mail () hand delivery on {date} _____, 20____ to the following:

Respondent Name: _____

Respondent Attorney Name (if applicable): _____

Signature of Pro Se Party **OR** Attorney (if applicable)

Printed Name: _____

Address: _____

City, State, Zip: _____

E-Mail: _____

Florida Bar Number (if Applicable): _____

EXHIBIT "B"

**IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT
IN AND FOR OKALOOSA COUNTY, FLORIDA**

IN RE: The Marriage of

_____,
Petitioner,

and

Case No. _____

_____,
Respondent.

SPECIAL AFFIDAVIT FOR UNCONTESTED DISSOLUTION OF MARRIAGE

NOTE: YOU MUST ANSWER EVERY QUESTION, EITHER BY TYPING OR PRINTING NEATLY IN INK.

I, the undersigned, declare under oath and penalty of perjury that I have read this document and the facts stated in it are true.

1. My name is _____.

I am the () Petitioner () Counter-Petitioner in the above action. I am now married to

_____.

We were married in (County & State) _____ on (date) _____.

2. My current address is _____.

3. My spouse's current address is _____.

4. I have carefully re-read my Petition/Counterpetition for Dissolution of Marriage. Everything said in it is true and accurate to the best of my knowledge and belief or I have made corrections below.

5. Residency: Have either you or your spouse resided in the State of Florida continuously as a permanent resident for more than six months before the date the Petition for Dissolution was filed?

() Yes () No

Which spouse? _____ (write "Husband", "Wife", or "Both")

A photocopy of a party's Florida Driver's license or in the alternative an Affidavit of Corroboration Witness has been filed.

6. Military Armed Forces: Are you or your spouse a member of the United States armed forces?
 Yes No

Which spouse? _____ (write "Husband", "Wife", or "Both")

Is either party on military assignment outside of the State of Florida at this time?
 Yes No Not Applicable

7. Marriage Irretrievably Broken: "Irretrievably Broken" means that the marriage cannot be put back together or salvaged in any way, not even with the help of marriage counseling. Is your marriage irretrievably broken?
 Yes No

8. Children:

- A. Are there children between the parties born or adopted during the marriage who are still minors (under age 18 or still in high school with an anticipated date of graduation prior to age 19)?
 Yes No

If yes, state their names and dates of birth.

Name(s)	Date of Birth
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- B. Are there minor children born during the marriage who are not the biological children of the Husband?
 Yes No

If yes, state their names and dates of birth.

Name(s)	Date of Birth
---------	---------------

- C. Is either spouse pregnant?
 Yes No If Yes, Due Date: _____

9. Assets and Liabilities Disclosure: Have both of you and your spouse fully disclosed all assets, liabilities, and incomes to each other?
 Yes No

10. Agreement: If there is **NO** Marital Settlement Agreement filed skip to Question 11, otherwise have **both** you and your spouse signed and notarized a Marital Settlement Agreement (and Parenting Plan if there are children) settling all the issues in this case?
 Yes No

- A. Do you recognize both you and your spouse's signature on the agreement(s)?
 Yes No

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THIS DOCUMENT AND THE FACTS STATED IN IT ARE TRUE.

Signature of Party

Printed Name: _____

Address: _____

City, State, Zip: _____

E-Mail: _____

STATE OF _____

COUNTY OF _____

Sworn to or affirmed and signed before me on *{date}* _____, 20____, by
{name of affiant} _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk]

____ Personally known

____ Produced identification-Type of identification produced _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing has been furnished by: () regular U.S. mail
() e-mail () hand delivery on {date} _____, 20____, to the following:

Name: _____

Attorney Name (if applicable): _____

Signature of Pro Se Party **OR** Attorney (if applicable)

Printed Name: _____

Address: _____

City, State, Zip: _____

E-Mail: _____

Florida Bar Number (if Applicable): _____

EXHIBIT "C"

**IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT
IN AND FOR OKALOOSA COUNTY, FLORIDA**

IN RE: The Marriage of

_____,
Petitioner,

and

Case No. _____

_____,
Respondent.

**ATTORNEY CHECKLIST FOR UNCONTESTED DISSOLUTION OF MARRIAGE
WITHOUT HEARING**

****This form must be completed and accompany the proposed Final Judgment of Dissolution of Marriage which may be submitted to Court electronically after 20 days from that date petition filed.**

1. The undersigned certifies that all documents required for entry of a Final Judgment of Dissolution of Marriage without hearing have been filed with the Clerk of Court.

✓ PARTY	DIN	DATE FILED OR N/A	DOCUMENT
<input type="checkbox"/> Husband <input type="checkbox"/> Wife			Petition for Dissolution of Marriage
<input type="checkbox"/> Husband <input type="checkbox"/> Wife			(Cases with children) <input type="checkbox"/> Return of Service <i>OR</i> <input type="checkbox"/> Answer/Waiver
<input type="checkbox"/> Husband <input type="checkbox"/> Wife			(Cases with no children) <input type="checkbox"/> Return of Service with Default entered with Non-Military Affidavit <i>OR</i> <input type="checkbox"/> Answer/Waiver
<input type="checkbox"/> Husband <input type="checkbox"/> Wife			Residency Proof: (6 months before date of filing Petition for DOM) <input type="checkbox"/> FL Driver's License/ID <i>OR</i> <input type="checkbox"/> Affidavit of Corroborating Witness
<input type="checkbox"/> Husband <input type="checkbox"/> Wife			Notice of Social Security Number Notice of Social Security Number

✓ PARTY	DIN	DATE FILED OR N/A	DOCUMENT
___ Husband ___ Wife			Financial Affidavit* Financial Affidavit* *[Not required if no children, no support issues, and a written MSA disposing of all financial issues has been filed, or the Court lacks jurisdiction to determine any financial issues. Fla. Family L. R. P. 12.285(c)]
Signed by both parties			Marital Settlement Agreement (___ Child support complies with guidelines <i>OR</i> ___ Child support differs from guidelines.)
Signed by both parties			Parenting Plan
___ Husband ___ Wife			UCCJEA Affidavit UCCJEA Affidavit
___ Husband ___ Wife			Child Support Guidelines Worksheet
___ Husband ___ Wife			Motion to Deviate from Guidelines (if child support not pursuant to guidelines)
___ Husband ___ Wife			Certificate of Completion of Parenting Class Certificate of Completion of Parenting Class
___ Husband ___ Wife			Restoration of Former Name: ___ Yes ___ No Name to be restored: _____
___ Husband ___ Wife			Special Affidavit for Uncontested Dissolution of Marriage
___ Husband ___ Wife			Notice of Filing Special Affidavit for Uncontested Dissolution of Marriage

CERTIFICATE OF COUNSEL

The undersigned certifies that he/she has reviewed this case, all entries on the above checklist are correct, and this case is procedurally proper for the entry of a Final Judgment of Dissolution of Marriage without the necessity of a hearing.

Signature of Attorney
Florida Bar Number: _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing has been furnished by: () regular U.S. mail
() e-mail () hand delivery to {name} _____ on {date} _____, 20__.

Signature of Pro Se Party **OR** Attorney (if applicable)

Printed Name: _____

Address: _____

City, State, Zip: _____

E-Mail: _____

Florida Bar Number (if Applicable): _____