

IN THE CIRCUIT COURT OF THE
_____ JUDICIAL CIRCUIT, IN AND FOR
_____ COUNTY, FLORIDA

IN RE: The Marriage

_____,
Petitioner/Wife,

CASE NO. _____

and

_____,
Respondent/Husband

_____/

NOTICE OF SOCIAL SECURITY NUMBER

I, _____, certify that my social security number is _____, as required in section 61.052(7), sections 61.13(9) or (10), section 742.03(13), sections 742.032(1) - (3), and/or sections 742.10(1) - (2), Florida Statutes. My date of birth is: _____.

This notice is being filed in a dissolution of marriage in which the parties have ONE minor child in common, to-wit:

[Name] _____ DOB: _____ SSN: _____

Disclosure of my social security number shall be limited to the purpose of administration of the Title IV-D program for child support enforcement.

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

Dated _____

[Petitioner Name]
Address
Phone

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed before me on _____ day of _____,
20____, by [Name].

Notary Public, State of
Florida at Large
Printed Name: _____

Check One:

- _____ Personally Known
_____ Produced Identification
_____ Type of Identification Produced

(ADD certificate of service if not served with the initial
pleading)