IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT IN AND FOR HILLSBOROUGH COUNTY, FLORIDA FAMILY LAW DIVISION

IN RE OF:	
	CASE NO.: DIVISION:
and	
,	
NOTICE OF SERVICE OF FIRST SET OF	CHILD CUSTODY INTERROGATORIES
TO:	
The, by and throu	igh the undersigned counsel, pursuant to Rule
1.340 of the Florida Rules of Civil Procedure, he	reby propounds upon the,
Interrogatories numbered one (1) through two (2)), answers to which will be due within thirty (30)
days from the date of service.	
<u>CERTIFICATI</u>	E OF SERVICE
I HEREBY CERTIFY that on the	, a true and correct
copy of the foregoing was □ mailed, □ faxed, or	
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	NILO J. SANCHEZ, JR., ESQUIRE
	Florida Bar No.: 991521
	SANCHEZ & ASSOCIATES, P.A. 1006 N. Armenia Avenue
•	Tampa, FL 33607
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IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT IN AND FOR HILLSBOROUGH COUNTY, FLORIDA FAMILY LAW DIVISION

IN RE	E OF:	
		CASE NO.: DIVISION:
and		
		1
	Ι,	, being sworn, certify that the following information is true:
1.	PRIOR HISTORY:	•
you res	a. State the addresses of your resid sided at those addresses.	ences for the past five (5) years, and identify the dates that
		each and every doctor, health care provider, as well as all hich you have seen in the past three (3) years, and the purpose
(10) ye:	•	ver been arrested or convicted of any crime within the last ten ate and county where arrest occurred, and nature of offense.
2. within	CURRENT AND FUTURE PLAN a. State any plans which you may h your response the anticipated locatio	nave for the relocation of yourself and/or your family. Include

b. State your current visitation schedule, and whether such schedule is court ordered or privately

stipulated to between you and the other parent of the minor child.

c. State the current child support arrangements citing the dollar amount and frequency of payments.
d. State the names and addresses of every person known by you, or whom you believe has any knowledge in regard to these child's majority time-sharing matters. Please specify in detail the knowledge that you believe each person would have.
e. State what you consider to be the best custodial arrangement for your child and state your rationale.
f. Have the child expressed a preference to live with you? If so, please state the date of and circumstances regarding the expression of the preference, including the words used by the child.
g. State the address where you and the child would reside if you were granted majority time-sharing and describe with specificity the child's proposed living quarters.
h. Would you be able to devote yourself full time to the child's care and upbringing if you wer granted majority time-sharing? If not, state:
1) What portion of the day do you intend to spend with the child?

	2) The reason you cannot devote yourself full time to the child's care?
	3) How do you intend to provide for the child's care when you are not available? Please cite the name and address of the person/institution which will be caring for the child.
education, rel	ate whether you and the other parent have any major disagreements regarding the child's igious upbringing, discipline, health care needs, and/or extra curricular activities. If so a nature of these disagreements and each party's position as you perceive it.
relevant facts	at the names, addresses, and telephone number of each person who has knowledge of the concerning the issues of time-sharing and visitation involved in this case, and for each ree of such knowledge.
	o you believe there is anything about the other parent that renders her unfit to have rity time-sharing of the child? If so, please describe with specificity.
	you currently taking any medication? If so, list each medication, the dates on which you e medication and the purpose.

m. State with specificity what you consider to be the other parent's greatest weaknesses as a
parent.
I understand that I am swearing or affirming under oath to the truthfulness of the
answers to these interrogatories and that the punishment for knowingly making a false
statement includes fines and/or imprisonment.
DATED:
The foregoing instrument was acknowledged before me this day of, 2013, by
, who is personally known to me or who has produced Florida Identification
as identification and who did/did not take an oath.
NOTARY PUBLIC, STATE OF FLORIDA
NOTART FUBLIC, STATE OF TEORIDA

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