IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT, IN AND FOR SANTA ROSA COUNTY, FLORIDA

	, Petitioner	CASE NO:	
		DIVISION:	
VS			
	, Respondent		

PETITION TO DOMESTICATE OUT-OF-STATE DECREE

COMES NOW, the Petitioner, with this Petition to Domesticate Out-of-State Decree, and in support thereof states the following:

1. This action filed by the Petitioner requests this Court to recognize an out-of-state decree and is filed pursuant to Section 61, Part II, Florida Statutes (the "Uniform Child Custody Jurisdiction and Enforcement Act" or UCCJEA).

2. Petitioner is the (🗸 which one)	Mother Father of the minor of	hild(ren) below:
Names(s)	Place of Birth	Date of Birth
a		
b		
C		
(The Petitioner may attach a separate	e sheet to list this information, if nece	essary)
3. Respondent is the (✓ which one) _	Mother Father of the mino	r child(ren) above.
4. Petitioner lives at: (address, city, st	tate):	

5. Respondent lives at: (address, city, state):

6. An out-of-state decree/order was entered on (date) ______ from (county and state court) ______. A certified copy of this decree/order is attached to this petition. 7. This Court can exercise jurisdiction over this case because: _____ The child(ren) has/have lived in this county for at least the past six months; 8. It is in the best interests for this Court to exercise jurisdiction over this case and to accept the attached order accordingly. 9. Along with the acceptance of the attached custody decree/order, the Petitioner would request the following relief: Reimbursement of necessary expenses incurred in enforcing the attached order, including attorney's fees and court costs, pursuant to section 61.1332(2) Florida Statutes; _____ Other: _____ WHEREFORE, the Petitioner respectfully requests that the Court enter an order: _____ Accepting the attached out-of-state custody/divorce decree; _____ Awarding the Petitioner his/her fees for having to bring this action, including attorney's fees and court costs; _____ Any and all other relief deemed in the best interests of the minor child(ren).

Signature of Party

Printed Name

Address

City, State, Zip

STATE OF FLORIDA COUNTY OF _____

Sworn to (or affirmed) and subscribed before me on ______20 ___ by _____

NOTARY PUBLIC/DEPUTY CLERK

Printed Name

_____ Personally known

Produced identification _____