

IN THE CIRCUIT/COUNTY COURT OF THE EIGHTH JUDICIAL CIRCUIT,
IN AND FOR GILCHRIST COUNTY, FLORIDA

Case Number: _____

STATE OF FLORIDA
VS

Defendant

CRIMINAL/NON-CRIMINAL TRAFFIC
PARTIAL PAYMENT AGREEMENT

You have been ordered to pay/make partial payments to the Clerk of Court, Gilchrist County, Florida. Defendant represents that Defendant cannot pay the full amount and Defendant will pay the amount due of \$ _____ plus an administrative fee of \$25.00 (payable with the first payment) pursuant to this Partial Payment Agreement.

Total Due: _____

Defendant submits the following financial information:

Place of Employment _____

Address of Employer _____

Employer telephone number _____ Salary \$ _____

How long employed _____ Hours worked per week _____

Own, Rent or Board? _____

Address _____

Telephone Number _____ Driver's License No _____

The Defendant agrees as follows:

1. All payments will be in cash, money order, cashier's check or certified check, credit or debit card. (NO PERSONAL CHECKS)
2. Petitioner will pay \$ _____ today, followed by \$ _____ every _____ days beginning on or before _____ until the balance of \$ _____ is paid IN FULL.
3. I must immediately notify the Clerk of Court in writing of any changes in my address or phone number.
4. If you fail to comply with the payment plan pursuant to this agreement and you remain in default for five (5) calendar days from the due date of the payment your driver's license may be suspended and you will be assessed additional fees, and you are required to

appear before the court on _____, 20__ at _____ am/pm. If you fail to appear in court as required a *capias* for your arrest will be issued.

5. I understand the above terms and obligations and I agree to comply with this Partial Payment Agreement:

Defendant's Signature _____ Date: _____

Parent/Guardian's Signature _____ Date: _____

You may pay online by credit or debit card at the following address:

<https://www.myfloridacounty.com/courtpay>

You may pay in person between 8:30 a.m. and 5:00 p.m., Monday through Friday at the following address:

Gilchrist County Courthouse
Clerk of Court
112 South Main Street
Trenton, FL 32693

Or mail payment to:

Gilchrist County Clerk of Court
PO Box 37
Trenton, FL 32693

If paying by mail – make the certified check, cashier's check or money order payable to:
Gilchrist Clerk of Court

Dated: _____ Deputy Clerk _____