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

STATE OF FLORIDA		CASE#:	
VS.		-	
Defendant			
CRIMINAL	/ NON-CRIMINAL / TRA	FFIC PARTIAL PAY	MENT AGREEMENT
You, the Defendant, have ele Rosa County, Florida. You re	cted or have been ordered by present that you are unable to	the Court to pay parti- pay the fines/costs due	al payments to the Clerk of Courts, S on this case without a payment plan. er case) pursuant to this Partial Payr
Address:			
City:		State:	Zip:
Primary Contact Phone Number	er:	Work Phone Nu	ımber:
Email:			
Personal Reference:		Ph	one:
FOR CLERK USE ONLY: THE DEFENDANT AGRE			
1. Defendant will pay the one	-time fee of \$25.00 per case (to	o be paid with first payn	nent).
2. Defendant will pay\$	today or defendant's	first payment of \$	will be paid on or <u>upon return of paperwo</u>
followed by \$	PER MONTH.	NEXT PAYM	ENT DUE:
PAYMENTS ARE DU	E NO LATER THAN THE	10 TH 20 TH	30 TH OF EACH MONTH.
3. The balance of \$ to be paid in full.	(plus partial pay fee	s, judgment interest, ser	vice charges and/or collection fees, if a
4. Payments are due on or	before the due date for the	agreed upon amount	or more without penalty.

You have provided us with the following cellular number	r: and
the following email address:	•
⊠ By signing below, you understand and agree you are providing S providers with your express consent to use written, electronic or versions.	Santa Rosa County Clerk of Court and its affiliates, agents and service rerbal means to contact you.
This consent includes but is not limited to, contact by manual calli messages, text messages, emails and/or automatic telephone dialin penalties, restitution owed by you to this Court today or in the future.	ng systems with regard to services, fines,
⊠ You may revoke consent for us to contact you by any of these form by simply calling us at 850-981-5655 or visiting our business	e methods or otherwise restrict your permissions as provided in this soffice any time you are at our facility.
	ment and you remain in default for five (5) calendar days from the due addition, you will be assessed additional fees and this agreement will d I agree to comply with this Partial Payment Agreement.
Defendant's Signature	Date
Deputy Clerk/Notary Public	Date
PAYMENT OPTIONS:	
IN PERSON: To the Santa Rosa County Courthouse, 4025 Avalon Blvd. M. Pkwy., Gulf Breeze, FL. Monday thru Friday 8:00 am to 4:30 pm. (cash, check, mone)	Milton, FL 32583 or South End Service Ctr., 5841 Gulf Breeze ey order or credit/debit card accepted)
BY MAIL SEND TO: Clerk of Courts, P.O. Box 472 Milton, FL 32572. (check or money order only, made payable to the Clerk of C	Court; DO NOT send cash if paying by mail)
PAYMENTS MADE BY PHONE: (850) 981-5554,	PRESS # 7

COLLECTION DEPT: SHEILA (850)981-5639 -- JEANNIE (850) 981-5655 -- CINDY (850) 983-4638

FAX (850) 981-5649

PAYMENTS MADE ON LINE: WWW.SANTAROSACLERK.COM