

**IN THE CIRCUIT COURT
OF THE EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA**

This 2" x 3.5" box shall be left blank. You do *not* need to add the vertical and horizontal lines that constitute this box. These lines were only added to portray the size of the box on this document.

**CASE NUMBER: xx-xxxx-xx-xxxx
Circuit Civil Division Y**

Plaintiff

-vs-

Defendants

ORDER TITLE

Order Text...

DONE AND ORDERED in Gainesville, Alachua County, Florida on this ____ of ____, ____.

xxxxx - Circuit/County Court Judge

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that copies have been furnished by U.S. Mail or via filing with the Florida Courts E-Filing Portal on _____ to the following:

Party 1

Party 2

xxxxx - Judicial Assistant

If you are a person with a disability that is covered under the Americans with Disability Act, who needs an accommodation in order to participate in this proceeding, you are entitled to be provided with certain assistance, at no cost to you. Please call (352) 337-6237 or if you are hearing-impaired or voice-impaired, call 1-800-955-8771, within 7 working days after you receive this notice.