

**IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT  
IN AND FOR BAY COUNTY, FLORIDA**

CASE NO.: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)/Petitioner(s)

VS

\_\_\_\_\_  
Defendant(s)/Responder(s)

**PARTIAL PAYMENT AGREEMENT  
PURSUANT TO SECTION 28.246, FLORIDA STATUTES**

Pursuant to Section 28.246, Florida Statutes, I \_\_\_\_\_ acknowledge that I have filed my financial affidavit and I have been determined to be indigent or unable to make payment in full. I hereby request the establishment of the following Partial Payment Agreement with Harold Bazzel, Clerk of Court, and I agree to pay a non-refundable fee of \$25.00, which is due and payable upon execution of this agreement.

I will be obligated to pay court-related fees, charges, and costs in the amount of \$\_\_\_\_\_ plus any additional court-related fees, charges, and costs that may arise on this case. I agree to pay the minimum of \$\_\_\_\_\_, monthly beginning \_\_\_\_\_ and continuing until paid in full. All payments will be in cash (in person only), money order, cashier's check, or credit card.

I certify that I have been open and honest in entering into this payment plan. I am satisfied with this payment plan, and intend to be bound by it. I understand that failure to comply with this agreement may result in collection enforcement as provided by law.

**Defendant Personal Information:  
(Please Print)**

1. Name: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Telephone Number: \_\_\_\_\_
5. Driver's License No.: \_\_\_\_\_
6. Business Address: \_\_\_\_\_
7. Business Telephone Number: \_\_\_\_\_

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

Defendant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

You may pay in person or by mail at the following location:

Bay County Courthouse  
P.O. Box 2269  
300 East 4<sup>th</sup> Street  
Panama City, FL 32401

**STATE OF** \_\_\_\_\_

**COUNTY OF** \_\_\_\_\_

**Sworn to or affirmed and signed before me on** \_\_\_\_\_ **by**

\_\_\_\_\_.

\_\_\_\_\_  
**Notary Public or Deputy Clerk**

\_\_\_\_\_  
**Print, type, or stamp commission**

Personally known

Produced Identification      Type of identification produced \_\_\_\_\_