

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

STATE OF FLORIDA
vs.

Case # _____

CIVIL INFRACTION PARTIAL PAYMENT AGREEMENT

You, the Defendant, have elected to pay partial payments to the Jackson County Clerk of Courts. You represent that you are unable to pay the civil infraction due on this case without a payment plan. You will pay the amount owed plus an administrative fee of \$25.00 (one-time fee) pursuant to this Partial Payment Agreement.

Defendant submits the following financial/contact information:

1. Mailing Address: _____; City: _____; State: _____; Zip: _____

2. Home Phone: _____ Cell Phone: _____ Work Phone _____

Primary Contact Number: Home Phone Cell Phone Work Phone

3. Employer: _____

4. Email address: _____

The defendant agrees as follows:

1. Acceptable forms of payment are cash, money order, cashier's check, certified check; debit or credit card.
2. Defendant will pay the one-time fee of \$25.00 with this agreement.
3. Defendant Minimum payment due per month \$_____. The first payment of \$_____ will be paid on _____ followed by subsequent payments of \$_____ are due on the _____ of each month until paid in full.

The total civil infraction balance of \$_____ must be paid in full by _____ (by the 4th month).

4. Payments may be paid before the due date and/or for more than the agreed upon amount without penalty.

OATH: It is hereby acknowledged by the undersigned that all funds due must be paid to the Jackson County Clerk of Court by cash, money order, cashier's check, certified check, debit or credit card in the amounts and on the dates specified by this payment agreement. Please include the case number when sending payments by mail. As part of the agreement, the above named individual hereby certifies that the personal information provided is true and correct and any changes will be immediately provided to the Clerk's Office.

I understand the above terms and obligations and I agree to comply with this collection agreement.

Defendant's Signature

Date

Deputy Clerk

Date

Payment options:

- a. You may pay by money order, cashier's check or certified check by mail to **Jackson County Clerk of Courts, P.O. Drawer 510, Marianna, Florida, 32447.**
- b. You may pay in person by cash, money order, cashier's check, certified check or credit/debit card between 8:00 am and 4:30 pm*; Monday through Friday at the **Jackson County Courthouse, 4445 Lafayette Street, Marianna, Florida 32448.**
- c. You may pay by credit/debit card by phone during normal business hours*. Please call **(850) 482-9699** to speak with a deputy clerk. **Please note if paying by credit/debit card, there is a 3.5% service charge.**