

Two Things You Can do to Collect on a Judgment

1. Record your “Judgment” in the Public Record.

The “Public Record” is where deeds and mortgages are recorded. Putting your Judgment in the Public Record creates lien on any real estate that the Defendant owns. In other words, if he ever wants to sell or mortgage his property he'll have to pay you first.

How to do it:

- Get a certified copy of the judgment from the Clerk's office.
- Record the judgment - The fee is \$10 for the first page and \$8.50 for each other page

County Recorder's Office
Courthouse East
22 NW First Street, 1st. Floor
Miami, Florida 33128
Telephone: (305) 275-1155

North Dade Satellite Recording Office
15555 Biscayne Blvd., Room # 114
Miami, Florida 33160
Telephone: (305) 275-1155

South Dade Satellite Recording Office
10710 S.W. 211 Street, Room 1200
Miami, Florida 33189

West Dade Satellite Recording Office
11805 SW 26 Street, Room # 207
Miami, Florida 33175
Telephone: (305) 275-1155

2. Get the Court to Order the Defendant to Complete a “Fact Information Sheet”

Ask the judge to order the defendant to provide you with information about his property and income. If the Defendant fails to respond within the time limit he could be held in "contempt of court" by the judge.

- Attached is a fill in the blank Motion and an Order for the judge to sign.
- Hand-carry the motion to the judge's office. Explain what you want to judge's staff (who, hopefully will be helpful rather than give you the run around).
- Bring two (2) stamped envelopes for the Court to mail copies of the signed Order to yourself and the Defendant of the order
 - One should be self-addressed with your address
 - The other should have the defendant's address

IN THE COUNTY COURT IN AND FOR MIAMI-DADE COUNTY, FLORIDA

Case No. _____

Plaintiff

vs.

Defendant(s)

EX PARTE MOTION

For an Order to Compel Defendant to Complete
Form 7.343 ("Fact Information Sheet")

The Plaintiff has obtained a judgment against the Defendant in Small Claims Court. The Defendant has failed to pay the amount stated in the Judgment.

Plaintiff asks that the Court enter an Order requiring Defendant to complete Florida Small Claims Rules Form 7.343 ("Fact Information Sheet")

Respectfully Submitted.

Signature of Plaintiff (pro se)

Date: _____

Plaintiff's Address:

Plaintiff's Telephone No.:

IN THE COUNTY COURT IN AND FOR MIAMI-DADE COUNTY, FLORIDA

Case No. _____

Plaintiff

vs.

Defendant(s)

ORDER

to Compel Defendant to Complete
Form 7.343 ("Fact Information Sheet")

The Plaintiff, appearing pro se, has moved for an Order requiring the Defendant to complete Florida Small Claims Rules Form 7.343 ("Fact Information Sheet").

The Court, having considered the Premises, it is hereupon,

ORDERED AND ADJUDGED that the Motion be granted. The Defendant is ordered to complete Florida Small Claims Rules Form 7.343 ("Fact Information Sheet"), copy attached, and return it to Plaintiff within 45 days from the date of this Order, unless the final judgment is satisfied or a motion for new trial or notice of appeal is filed.

ORDERED at Miami-Dade Florida, on _____, 20__

County Court Judge

Copies furnished to:
Plaintiff (address below)

Defendant (last known address below)

Form 7.343.

FACT INFORMATION SHEET -- INDIVIDUAL

Full Legal Name: _____

Nicknames or Aliases: _____

Residence Address: _____

Mailing Address (if different): _____

Telephone Numbers: (Home) _____ (Business) _____

Name of Employer: _____

Address of Employer: _____

Position or Job Description: _____

Rate of Pay: \$ _____ per _____ Average Paycheck: \$ _____ per _____

Average Commissions or Bonuses: \$ _____ per _____. Commissions or bonuses are based on _____

Other Personal Income: \$ _____ from _____

(Explain details on the back of this sheet or an additional sheet if necessary.)

Social Security Number: _____ Birthdate: _____

Driver's License Number: _____

Marital Status: _____ Spouse's Name: _____

Spouse's Address (if different): _____

Spouse's Social Security Number: _____ Birthdate: _____

Spouse's Employer: _____

Spouse's Average Paycheck or Income: \$ _____ per _____

Other Family Income: \$ _____ per _____ (Explain details on back o this sheet or an additional sheet if necessary.)

Names and Ages of All Your Children (and addresses if not living with you):

Child Support or Alimony Paid: \$ _____ per _____

Names of Others You Live With: _____

Who is Head of Your Household? ___ You ___ Spouse ___ Other Person

Checking Account at: _____ Account # _____

Savings Account at: _____ Account # _____

(Describe all other accounts or investments you may have, including stocks, mutual funds, savings bonds, or annuities, on the back of this sheet or an additional sheet if necessary.)

For Real Estate (land) You Own or Are Buying:

Address _____

All Names on Title: _____

Mortgage Owed to _____

Balance Owed: \$ _____

Monthly Payment: \$ _____

(Attach a copy of the deed or mortgage, or list the legal description of the property on the back of this sheet or an additional sheet if necessary. Also provide the same information on any other property you own or are buying.)

For All Motor Vehicles You Own or Are Buying:

Year/Make/Model _____ Color _____

Vehicle ID #: _____ Tag No: _____ Mileage: _____

Names on Title: _____ Present Value: \$ _____

Loan Owed to _____

Balance on Loan: \$ _____ -

Monthly Payment: \$ _____. (List all other automobiles, as well as other vehicles, such as boats, motorcycles, bicycles, or aircraft, on the back of this sheet or an additional sheet if necessary.)

Have you given, sold, loaned, or transferred any real or personal property worth more than \$100 to any person in the last year? _____. If your answer is "yes," describe the property and sale price, and give the name and address of the person who received the property.

Does anyone owe you money? Amount Owed: \$ _____

Name and Address of Person Owing Money: _____

Reason money is owed: _____

Please attach copies of the following:

- a. Your last pay stub.
- b. Your last 3 statements for each bank, savings, credit union, or other financial account.
- c. Your motor vehicle registrations and titles.
- d. Any deeds or titles to any real or personal property you own or are buying, or leases to property you are renting.

UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT THE FOREGOING ANSWERS ARE TRUE AND COMPLETE.

Judgment Debtor

STATE OF FLORIDA
COUNTY OF MIAMI-DADE.

The foregoing instrument was acknowledged before me on _____, 200__ by _____, who is personally known to me or has produced _____ as identification and who did/did not take an oath.

WITNESS my hand and official seal, on _____, 200__

Notary Public
State of Florida
My Commission expires

MAIL OR DELIVER THIS FORM TO THE CLERK OF THE COURT, AND MAIL OR DELIVER A COPY OF THE COMPLETED FORM TO THE JUDGMENT CREDITOR OR THE CREDITOR'S ATTORNEY.

FACT INFORMATION SHEET -- BUSINESS ENTITY

Name/Title of person filling out this form: _____

Address _____

Telephone Number: Home _____ Business: _____

Type of Entity: (Check One) Corporation Partnership Limited Partnership Sole Proprietorship Limited Liability Corporation (LLC) Professional Association (PA) Other: (Please Explain)

Does Business Entity own/have interest in any other business entity? If so please explain.

Gross/Taxable income reported for Federal Income Tax purposes last three years: \$ _____, \$ _____, and \$ _____

Taxpayer Identification Number: _____

List Partners (General or Limited and Designate Percentage of Ownership):

Average No. of Employees/Month: _____

Names of Officers and Directors _____

Checking Account at : _____
Account No _____

Savings Account At _____

Does the Business Entity own any vehicles: _____

Years/Makes/Models _____

Vehicle I.D. Nos.: _____

Tag Nos.: _____

Loans Outstanding: _____

Does the Business Entity own any real property: YES _____ NO _____

If Yes: Address: _____

Please check if the business entity owns the following:
___ Boat _____ Camper

___ Stocks/Bonds
___ Other Personal Property

___ Other Real Property
___ Intangible Property

UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT THE FOREGOING ANSWERS ARE TRUE AND COMPLETE.

Defendant's Designated Representative

Print name and Title

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me on _____, 200__ by _____, who is personally known to me or has produced _____ as identification and who did/did not take an oath.

WITNESS my hand and official seal, on _____, 200__

Notary Public
State of Florida
My Commission expires

MAIL OR DELIVER THIS FORM TO THE CLERK OF THE COURT, AND MAIL OR DELIVER A COPY OF THE COMPLETED FORM TO THE JUDGMENT CREDITOR OR THE CREDITOR'S ATTORNEY.