

**IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR MIAMI-DADE COUNTY, FLORIDA**

JUVENILE DIVISION	PETITION AND ORDER TO SHOW CAUSE	CASE NUMBER
IN THE INTEREST OF: _____ D.O.B.: _____ A CHILD(REN)		CLOCK IN

Comes now your Petitioner and respectfully shows unto the Court that _____
_____ has failed and refused to follow the Order of this Court
entered on _____, 20 _____.
Wherefore, Petitioner requests that an Order to show Cause be issued and that upon hearing thereof that
_____ be adjudged in contempt for _____
non-compliance as aforesaid; that she/he committed to the County Jail until she/he shall purge herself/himself.

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

Petitioner

Before the undersigned authority this day personally appeared the aforesaid Petitioner, who after being first duly sworn, deposes and says that the matters and things set forth in the foregoing are true.

SWORN TO and SUBSCRIBED before me this _____ day of _____, 20 ____.

Ex-officio Notary Public, authorized to
administer oaths, State of Florida

Notary Public, State of Florida at Large
My commission expires:

ORDER TO SHOW CAUSE

The Court having heard and considered the foregoing sworn petition, it is thereupon: **ADJUDGED** that
_____ shall appear before the undersigned Judge of the Eleventh Judicial Circuit, Juvenile
Division, located at the Miami Dade Children's Courthouse 155 N.W. 3rd Street, Miami, Florida 33128 at _____ am/pm on
the day of _____, 20 _____, and then and there to show cause, if any, why she/he should not be
adjudged in contempt for failure to follow the Order of Court dated _____, 20 _____, as set forth
in the foregoing sworn petition.

ORDERED at Miami, Florida, this _____ day of _____, 20 ____.

CIRCUIT JUDGE

**AMERICANS WITH DISABILITIES ACT OF 1990
ADA NOTICE**

“If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the Eleventh Judicial Circuit Court’s ADA Coordinator, Lawson E. Thomas Courthouse Center, 175 NW 1st Ave., Suite 2702, Miami, FL 33128, Telephone (305) 349-7175; TDD (305) 349-7174, Fax (305) 349-7355 at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.”