

IN THE CIRCUIT AND COUNTY COURTS OF THE FIFTH JUDICIAL CIRCUIT  
IN AND FOR LAKE COUNTY, FLORIDA

THE STATE OF FLORIDA

Case Number: \_\_\_\_\_

VS.

\_\_\_\_\_  
Defendant

**PAYMENT CONTRACT FOR  
RESTITUTION**

Pursuant to Section 28.246, Florida Statutes, I \_\_\_\_\_  
have been determined to be unable to make payment in full for my outstanding restitution obligation. I am,  
therefore, entering into this payment contract with Gary J. Cooney, Clerk of the Circuit Court and  
Comptroller.

I am obligated to pay restitution, in the amount of \$ \_\_\_\_\_. I agree to pay the  
minimum of \$ \_\_\_\_\_ monthly for \_\_\_\_\_ months, beginning \_\_\_\_\_ and  
continuing until paid in full.

I understand that, in addition to the foregoing, a non-refundable administrative fee of \$3.50 per  
payment will be assessed for processing and disbursing the restitution payments.

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 contract may  
result in collection enforcement as provided by law. Such collection enforcement may include suspension  
of my driver's license and referral to a collection agency authorized to add a collection fee of up to 40% of  
the outstanding balance on this contract.

\_\_\_\_\_  
Date  
\_\_\_\_\_  
Signature  
Print Name: \_\_\_\_\_ Home Telephone: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Business Telephone: \_\_\_\_\_ Cell Telephone: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF LAKE

Sworn to or affirmed and signed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

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

\_\_\_\_\_  
(Print, type or stamp name of notary or clerk)

\_\_\_\_ Personally known  
\_\_\_\_ Produced identification

Type of identification produced \_\_\_\_\_