First Step\_ **Step 1**

First name

Middle Name

Last Name

Phone number

Email

**Step 2**

**Mailing Address include Add County name**

**Do you have a final judgment or court order requiring someone to pay you alimony and / or child support? Yes / No |**

**If not –**

*“Unfortunately, Support Solution cannot assist you this time. You need to get a court order or final judgment from the court awarding you alimony and / or child support. Feel free to contact us for further information.*

**If yes –**

**Home Phone number**

**Work Phone number Optional**

**What would you like us to collect for you**?\* Alimony, child support, Alimony & child support

**Approximately how much money are you owed? Minimum $5,000**

***“****To hire Support Solutions for your unpaid support needs a minimum amount of unpaid support must be owed. Because of the $750 cost for an investigation, court costs and filing fees, at least $5,000.00 is required to ensure that collection will be beneficial to you. If your unpaid support eventually surpasses $5,000.00, please contact us at that time.”*

**In what State was your child support or alimony order entered?\***

**Are you currently receiving payments?\*** Yes / No

**Are you receiving any form of public assistance**?\* Yes / No - If Yes Please describe what type of public assisting you are receiving

**Step 3 – Payment Stage**

**Getting Started**

Top of Form

100%

* **Agree to Hire Support Solutions**
* You made it this far! Keep up the great work!
* In order to continue any further, a cost retainer will need to be paid to secure your representation and begin an immediate investigation.

**Please read below... this is very important!**

Support Solutions handles the collection of alimony and unpaid child support on a contingency fee. That means if Support Solutions does not recover money for you, you are not required to pay any legal fees.

<="" p="" style="box-sizing: border-box !important;">

The sum is $750 and is applied as follows:

* + $400 is the initial cost to perform a comprehensive background and investigative search on the person that owes the support.
  + The remaining $350 dollars is held in a trust account for anticipated court costs.

Support Solutions **does not** receive or keep any portion of these costs. If support solutions determines based on its investigation that there are no realistic ways to recover your unpaid support, Support Solutions will notify you immediately and return to you $350 from the $750 initially paid. You will only be charged for the background investigation and provided with a full report of the findings for your records and review.

* **Contingency Fee Agreement**

AUTHORITY TO REPRESENT AND FEE AND COST AGREEMENT The undersigned client does hereby retain and employ YOUR SUPPORT SOLUTION, P.A. d/b/a SUPPORT SOLUTIONS, as my attorneys to represent me in the prosecution of claims against who is responsible for payment of unpaid child support and / or unpaid alimony. My attorneys may associate such other co-counsel as they deem necessary in the handling of this claim. The undersigned client has, before signing this contract, received and read the Statement of Client's Rights and understands each of the rights set forth therein. The undersigned client has signed the statement and received a signed copy to keep to refer to while being represented by the undersigned attorneys. This contract may be canceled by written notification to the attorneys at any time within three (3) business days of the date the contract was signed, as shown below. PLEASE NOTE THAT THE INITIAL “COSTS” IN THE SUM OF SEVEN HUNDRED FIFTY AND 00/100 DOLLARS ($750.00) PAID IN CONNECTION WITH RETAINING AND EMPLOYING OUR SERVICES WILL NOT BE FULLY REFUNDABLE. HOWEVER, A PORTION OF SUCH COSTS MAY BE REFUNDABLE TO THE EXTENT NOT USED. PLEASE REFER TO THE “PAYMENT OF COSTS AND REFUND POLICY” PROVIDED TO YOU ON OUR WEBSITE (www.owedsupport.com). As compensation for their services, I agree to pay to my said attorneys, from the proceeds of any amount recovered, the greater of the following fee schedule (in accordance with and not to exceed the Florida Supreme Court guidelines), or court awarded fee: 331/3% of any recovery up to One Million and 00/100 Dollars ($ 1,000,000.00); 20% of any recovery in excess of One Million and 00/100 Dollars ($ 1,000,000.00); The term recovery as used in this contract means the total recovery of sums owed for past due child support and/or alimony and/or attorneys’ fees and costs, without any deduction for outstanding costs of litigation incurred by the attorneys in this case. I also agree to pay the expenses incurred in the preparation, handling, investigation, prosecution, and the court costs incurred in pursuing collection and/or enforcement of any judgment or court order awarding child support and/or alimony and/or attorneys’ fees and costs. This is also known as a “post judgment proceeding.” All funds for the collection and/or enforcement of any judgment or post judgment proceedings or other legal process, and for investigation and service of process will be received by the attorneys in advance as a result of your payment of the cost retainer in the sum of Seven Hundred Fifty and 00/100 Dollars ($750.00). Accordingly, I agree to pay my attorneys a Seven Hundred Fifty and 00/100 Dollars ( $750.00) cost retainer upon execution hereof. This retainer shall only be used towards the costs of these matters and may not be used as fees. I further acknowledge, understand and agree that no appeals shall be undertaken unless a separate written contract is executed therefore. I fully understand that my attorneys have not predicted the success in any cause or the amount of costs which will be incurred on my behalf. DATED AT , Florida, this day of , 2015. CLIENT The above employment is hereby accepted upon the terms stated herein. YOUR SUPPORT SOLUTION, P.A. d/b/a SUPPORT SOLUTIONS BY: David Bonham, Esq., Florida Bar No.:0128813 Lawrence J. Shapiro, Esq., Florida Bar No.: 0796085

* Accept Contingency Fee Agreement\* ---Do I need all fields or checkbox enough?---
  +  By checking this box, I acknowledge that I have read and understand all the terms and provisions of the Support Solutions' Contingency Fee Agreement.
* Full Legal Name\*

By typing my full legal name below I hereby accept and agree to be bound by the terms and provisions of the Support Solutions' Contingency Fee Agreement.

First Middle Last Suffix

* **Your Rights**
* **Statement of Client Rights**

STATEMENT OF CLIENT'S RIGHTS Before you, the prospective client, arrange a contingency fee agreement with a lawyer, you should understand this Statement of your rights as a client. This statement is not a part of the actual contract between you and your lawyer, but as a prospective client, you should be aware of these rights: 1. There is no legal requirement that a lawyer charge a client a set fee or a percentage of money recovered in a case. You, the client, have a right to talk with your lawyer about the proposed fee and to bargain about the rate or percentage as in any other contract. If you do not reach an agreement with one lawyer you may talk with other lawyers. 2. Any contingency fee contract must be in writing and you have three (3) business days to reconsider the contract. You may cancel the contract without any reason if you notify your lawyer in writing within three (3) business days of signing the contract. If you withdraw from the contract within the first three (3) business days you do not owe the lawyer a fee although you may be responsible for the lawyer's actual costs during that time. If your lawyer begins to represent you, your lawyer may not withdraw from the case without giving you notice, delivering necessary papers to you, and allowing you to employ another lawyer. Often, your lawyer must obtain court approval before withdrawing from a case. If you discharge your lawyer without good cause after the three-day period, you may have to pay a fee for work the lawyer has done. 3. Before hiring a lawyer, you, the client, have the right to know about the lawyer's education, training and experience. If you ask, the lawyer should tell you specifically about his or her actual experience dealing with cases similar to yours. If you ask, the lawyer should provide information about special training or knowledge and give you this information in writing if you request it. 4. Before signing a contingency fee contract with you, a lawyer must advise you whether he or she intends to handle your case alone or whether other lawyers will be helping with the case. If your lawyer intends to refer the case to other lawyers he or she should tell you what kind of fee sharing arrangement will be made with other lawyers. If lawyers from different law firms will represent you, at least at least on lawyer from each firm must sign the contingency fee contract. 5. If your lawyer intends to refer your case to another lawyer or counsel with other lawyers. your lawyer should tell you about that at the beginning. If your lawyer takes the case and later decided to refer it to another lawyer or to associate with other lawyers, you should sign a new contract which includes the new lawyers. You, the client, also have the right to consult with each lawyer working on your case and each lawyer is legally responsible to represent your interests and is legally responsible for the acts of the other lawyers involved in the case. 6. You, the client, have the right to know in advance how you will need to pay the expenses and the legal fees at the end of the case. If you pay a deposit in advance for costs, you may ask reasonable questions about how the money will be or has been spent and how much of it remains unspent. Your lawyer should give a reasonable estimate about future necessary costs. If your lawyer agrees to lend or advance you money to prepare or research this case, you have the right to know periodically how much money your lawyer has spent on your behalf. You also have the right to decide, after consulting with your lawyer, how much money is to be spent to prepare a case. If you pay the expenses, you have the right to decide how much to spend. Your lawyers should also inform you whether the fee will be based on the gross amount recovered or on the amount recovered minus the costs. 7. You, the client, have the right to be told by your lawyer possible adverse consequences if you lose the case. Those adverse consequences might include money which you might have to pay to your lawyer for costs and liability you might have for attorney’s fees to the other side. 8. You, the client, have the right to receive and approve a closing statement at the end of the case before you pay any money. The statement must list all of the financial details of the entire case, including the amount recovered, all expenses, and a precise statement of your lawyer's fee. Until you approve the closing statement you need not pay any money to anyone, including your lawyer. You also have the right to have every lawyer or law firm working on your case sign this closing statement. 9. You, the client, have the right to ask your lawyer at reasonable intervals how the case is progressing and to have these questions be answered to the best of your lawyer's ability. 10. You, the client, have the right to make the final decision regarding settlement of a case. Your lawyer must notify you of all offers of settlement before and after the trial. Offers during the trial must be immediately communicated and you should consult with your lawyer regarding whether to accept a settlement. However, you must make the final decision to accept or reject a settlement. 11. If at any time, the client, believe that lawyer has charged an excessive or illegal fee, you the client, have the right to report the matter to the Florida Bar, the agency that oversees the practice and behavior of all lawyers in Florida. For information on how to reach the Florida Bar, call 800-342-8060, or contact the local bar association. Any disagreement between you and your lawyer about a fee can be taken to court and you may wish to hire another lawyer to help you resolve this disagreement. Usually fee disputes must be handled in a separate lawsuit. Client's Signature Your Support Solution, P.A. d/b/a Support Solutions Date Date

* Accept Client Rights Agreement\*
  +  By checking this box, I acknowledge that I have read and understand all the terms and provisions of the Support Solutions' Clients Rights Agreement.
* Full Legal Name\*

By typing my full legal name below I hereby accept and agree to be bound by the terms and provisions of the Support Solutions' Clients Rights Agreement.

First Middle Last Suffix

* **Our Service Agreement**
* **Terms of Service Agreement**

TERM AND CONDITIONS Last Updated: April 10, 2015 Please read these Terms and Conditions (here in referred to alternatively as "Terms", "Terms and Conditions") carefully before using the www.owedsupport.com website (here in referred to alternatively as the "Service") operated by Your Support Solution P.A. d/b/a Support Solutions (here in referred to alternatively as “Support Solutions”). Your access to and use of the Service is conditioned on your acceptance of and compliance with these Terms. These Terms apply to all visitors, users and others who access or use the Service. By accessing or using the Service you agree to be bound by these Terms. If you disagree with any part of the terms then you may not access the Service. Termination We may terminate or suspend access to Support Solutions’ Service immediately, without prior notice or liability, for any violation of State, Federal, or International law, negligences, gross negligence or illegal improper attempts or actual use of this service provided by Support Solutions including without limitation if you breach these Terms. All provisions of the Terms, which by their nature should survive termination, shall survive termination, including, without limitation, ownership provisions, warranty disclaimers, indemnity and limitations of liability. Links To Other Web Sites Support Solutions’ Service contains links to third ¬party web sites through Support Solutions’ affiliate program and payment gateway that are not owned or controlled by Support Solutions. Support Solutions has no control over, and assumes no responsibility for, the content, privacy policies, or practices of any third party web sites or services. You further acknowledge and agree that Support Solutions shall not be responsible or liable, directly or indirectly, for any damage or loss caused or alleged to be caused by or in connection with use of or reliance on any such content, goods or services available on or through any such web sites or services. We strongly advise you to read the terms and conditions and privacy policies of any third¬ party web sites or services that you visit. Payment When you make a payment for the asset and financial investigation and the court costs/ filing fees you will be redirected to LawPay’s website. Lawpay is a reputable credit card processor that will keep your information confidential using TLS version 1.0 or greater for securing data communication and 256 bit AES encryption for securing sensitive data at rest. Governing Law These Terms shall be governed and construed in accordance with the laws of the State of Florida, without regard to its conflict of law provisions. Support Solutions’ failure to enforce any right or provision of these Terms will not be considered a waiver of those rights. If any provision of these Terms is held to be invalid or unenforceable by a court, the remaining provisions of these Terms will remain in effect. These Terms constitute the entire agreement between Support Solutions regarding Support Solutions’ Service, and supersede and replace any prior agreements we might have between Support Solutions regarding the Service. Changes We reserve the right, at Support Solutions’ sole discretion, to modify or replace these Terms at any time. Changes and clarifications will take effect immediately upon their posting on the website. If we make material changes to this policy, we will notify you here that it has been updated, so that you are aware of what information we collect, how we use it, and under what circumstances, if any, we use and/or disclose it. What constitutes a material change will be determined at Support Solutions’ sole discretion. By continuing to access or use Support Solutions’ Service after those revisions become effective, you agree to be bound by the revised terms. If you do not agree to the new terms, please stop using the Service. Contact Us If you have any questions about these Terms, please contact us.

* Accept Terms of Service\*
  +  By checking this box, I acknowledge that I have read and understand all the terms and provisions of the Support Solutions' Terms of Service Agreement.
* Full Legal Name\*

By typing my full legal name below I hereby accept and agree to be bound by the terms and provisions of the Support Solutions' Terms of Service Agreement.

First Middle Last Suffix

* **Cost Breakdown**
* Comprehensive Asset and Financial Investigation as detailed above\*

Price: $400.00

* Court Costs as detailed above\*

Price: $350.00

* Total Initial Costs

$750.00

* Credit Card\*

American Express

Discover

MasterCard

Visa

Card Number                                                                                                           Expiration Date Security CodeCardholder Name

* Your payment is secure using TLS version 1.0 or greater for securing data communication and 256 bit AES encryption for securing sensitive data at rest. Once the payment is complete you will be redirected back to owedsupport.com to receive your confirmation that your payment is complete.



Bottom of Form

**Last Form – Post Payment – Step Four**

**In case we are not able to reach you is there someone else we can contact?**

**Alternate contact name not mandatory**

**Alternate contact phone number not mandatory**

**Date of Birth:**

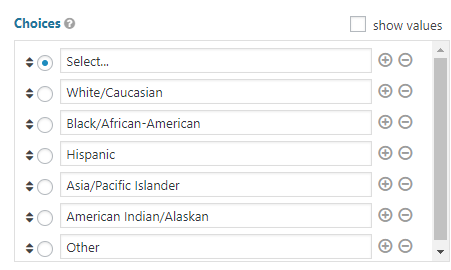
**Social** **Security Number**:

Enter your social security number. Your social security number is necessary because Support Solutions will be legally representing you in this child support case. We take the utmost precautions to protect your personal information and only ask for information that is necessary for us to conduct our business. We understand this information is sensitive and we are legally responsible to protect your privacy. Please read our privacy-**link** policy.

**Social Security number**:

**Gender: Male / Female**

**Race of other party who owes you money?**



**What is the FULL NAME of the person who owes you money?**

**First Name\_\_\_\_\_\_\_\_\_\_\_ Middle Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is their home address?**

**Street\_\_\_\_\_\_\_\_\_\_\_ Apt\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_ County\_\_(optional)\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_optional\_\_\_\_\_\_**

**What is their work address if known? Optional**

**What is their phone number \_\_\_\_\_\_\_\_\_\_\_\_\_ Optional**

**What is their email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_Optional**

**To your knowledge, is the person who owes presently in jail or prison?**

**Yes / No**

**Online Application Form from WordPress – all questions here**

**……**

**---HERE---**

**From Gravity Forms**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| begin form  **START PAGING**  top of the first page   * Entry Url * What is your full legal name   -Questions are marked in green  First Middle Last Suffix   * -We already have first, middle and last name in step 1 why not add the suffix field to step 1 so we don’t have to include it twice in this step? * Your Mailing Address   Enter the street address of your current mailing address. This is the location to which we will send any child support payments we collect for you. Enter the Apartment / Building / Floor / Suite of your current mailing address. This is the location to which we will send any child support payments we collect for you. Enter the / locality of your current mailing address. This is the location to which we will send any child support payments we collect for you. Select the state / region of your current mailing address. This is the location to which we will send any child support payments we collect for you.  Street AddressAddress Line 2CityState / Province / RegionZIP / Postal CodeCountry   * -We already have a field called mailing address in step 2. should we remove that field from there and just stick with these fields for step 4 for the address? * Home Phone Number:   Enter the home phone number at which you can be reached. For US Phone numbers, use the following format: ###-###-####.     * Cell Phone Number:   Enter the cell phone number at which you can be reached. For US Phone numbers, use the following format: ###-###-####.     * Work Phone Number:Enter the work phone number at which you can be reached. For US Phone numbers, use the following format: ###-###-####. * -We already have home phone number, cell phone number and work phone number in step 2      * end of page   **PAGE BREAK**  top of new page   * **Security Section**   **Your Security Information:**  We understand this information is sensitive and we are legally responsible to protect your privacy. Please read our [Privacy Statement](http://wunderfi.com/jumpin/privacy-statement/)  Enter your mother's full name (First & Last) for added security.     * Mother's Maiden Name   To help us verify you.  Last   * Case Number   Please enter the case number.     * Court Order State      * Court Order County      * Date final judgment was obtained   https://owedsupport.com/wp-content/plugins/gravityforms/images/calendar.png   * Name of court where the case was filed   Example: Circuit Court, Miami     * Last 4 of your social security number   **Your information is ALWAYS kept confidential. Please see our privacy policy for more.**     * Terrific Progress * Children Involved in Case      | **First Name** | **Last Name** | **DOB** |  | | --- | --- | --- | --- | |  |  |  |  |  * Children Involved in Case      | **First Name** | **Last Name** | **DOB** |  | | --- | --- | --- | --- | |  |  |  |  |  * Does each child above live with you?      * If not, please explain.      * **Alternate Contact Person** * **-We already have this**   If we cannot reach you, or if there is an emergency, who can we contact and how can we contact them?   * Name   First Last   * Phone      * Email      * Best Method to Contact This Person   + Phone   + Email   + Both * Court order or Final Judgment Requirement   **HTML CONTENT**This is a content placeholder. HTML content is not displayed in the form admin. Preview this form to view the content.   * How would you like to send us a copy of the court order? -What are the options?      * Support Solutions Fax Information   **HTML CONTENT**This is a content placeholder. HTML content is not displayed in the form admin. Preview this form to view the content.   * Support Solutions U.S. Mail Information   **HTML CONTENT**This is a content placeholder. HTML content is not displayed in the form admin. Preview this form to view the content.   * File   Drop files here or   * Has this final judgment or court order been modified?      * How would you like to send us a copy of the modification?      * The Person that Owes You Money * -We already have fields on the person that owes money. Maybe merge these?   List of Possible Alias  Does the person who owes you money have any aliases / nicknames?     | **First** | **Last** |  | | --- | --- | --- | |  |  |  |  * Present Address / Last Known   Street AddressAddress Line 2CityState / Province / RegionZIP / Postal CodeCountry   * Occupation   Occupation of the person that owes you money.     * Birth Date      * Social Security Number (SSN)   Please enter the SSN of the person who owes you money. If you cannot locate the SSN of the person that owes you money, try to locate old joint tax returns or other documents where that information could be found.     * Phone Number      * Mobile Phone Number      * Work Phone Number      * Work Company Address   The address where the person that owes you money is employed  Street AddressAddress Line 2CityState / Province / RegionZIP / Postal Code   * If you have any of the following papers from the person who owes you money, please mark below all that apply.   + Financial Affidavit   + Loan Application   + Tax Returns   + Bank Statements or Records   + Investment Account Statements or Records   + 5 of 8 items shown. Edit field to view all * How would you like to send us a copy of documentation?      * Please upload one or more documents here   Drop files here or   * Do you know where the person who owes you money does their banking?      * Who do they bank with?   Bank Of America, Chase, Wells Fargo...etc.     * Account Number      * Do you need any other family law assistance?      * Please check any additional services that you are interested in.   + Un-reimbursed medical, dental, or healthcare expense   + Un-reimbursed extracurricular child expenses   + Enforcement of settlement agreement or final judgment   + Child Custody / Visitation   + Modification of child support   + 5 of 8 items shown. Edit field to view all * Briefly explain the details of any additional service(s) you selected.      * Please select the document(s) you would like to generate   + Motion for Writ of Garnishment   + Notice of filing answer of the garnishee   + Notice of right against garnishment   + Notice to individual def for claim of exemption from garnishment   + Writ of Garnishment * Liquidated Damages Amount   Found in original judgement     * Prejudgement Interest Amount   Found in original judgement     * Taxable Court Costs Amount   Found in the original judgement     * First Class Mailing Receipt #      * Certified Mailing Receipt Number      * Mailing Date   https://owedsupport.com/wp-content/plugins/gravityforms/images/calendar.png   * Account Number (s)      |  |  | | --- | --- | |  |  |  * Filing Date   Date in which the document(s) will be filed |

--BACK END USER--

Dissolution of marriage or paternity?

Petitioner?

Respondent?

State?

County?

Circuit?

Case number?

Which division?

Judge’s name?

Judge’s address?

Judge’s telephone number?

Judge’s email address?

Judge‘s courtroom?

Payor name?

Social Security number of Payor?

Date of birth of Payor?

Drivers license number of Payor?

Address of Payor?

Telephone number of Payor?

Payor's employer address and telephone number?

Payor’s professional license?

Is Payor represented by counsel?

-name

-address

-telephone number

-fax number

-email address

Does payor own any assets?

If so, describe below:

Does payor own real property?

If so provide:

-legal description

-folio number or parcel number

-physical address

-payor's interest in the property?

Payee name?

Social Security number of payee?

Payees address?

Payees telephone number?

Payees email address?

How many children?

For each child provide the following:

-name

-date of birth

-address

-Social Security number

-date of emancipation

Monthly child support obligation?

Bi-monthly amount?

Bi-weekly amount?

Weekly amount?

Total number of months delinquent child support?

Date of last child support payment?

Amount of last child support payment?

Total child support arrearages owed as of \_\_\_\_\_\_\_\_ is $\_\_\_\_\_\_\_\_\_\_\_.

Monthly alimony obligation?

Bi-monthly amount?

Bi-weekly amount?

Weekly amount?

Total number of months delinquent alimony?

Date of last alimony payment?

Amount of last alimony payment?

Total alimony arrearages owed as of \_\_\_\_\_\_\_\_ is $\_\_\_\_\_\_\_\_\_\_\_.

Total alimony and child support arrearages owed as of \_\_\_\_\_\_\_ is $\_\_\_\_\_\_\_\_\_.

Attorneys fees owed?

Amount?

Is there a written settlement agreement?

Date signed?

Is there a prevailing party clause in any agreement, judgment or order?

If so, describe:

Is there a written parenting plan?

Date signed?

Is there an income withholding order or income deduction order?

Date signed?

Name of garnishee?

Address of garnishee?

Telephone number of garnishee?

Email address for garnishee?

Central depository address?

FIPS Code?

Remittance Identifier?

Employer’s EIN?