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DIVISION OF ADMINISTRATIVE HEARINGS
STATE OF FLORIDA

FILED
2008 FEB 19 A 11: 55
DIVISION OF
ADMINISTRATIVE
HEARINGS

LARRY PHILLIPS,
Appellant,

Case No.:

L. T. Case Number.: 07-1969-RU

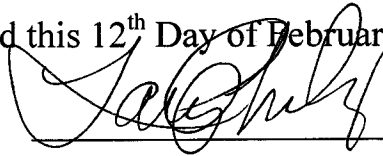
FLORIDA DEPARTMENT OF
CHILDREN AND FAMILIES,
Appellee,

_____ /

NOTICE OF APPEAL

NOTICE IS GIVEN that LARRY PHILLIPS, Appellant, appeals to the First District Court of Appeal the Order of this Division rendered January 16, 2008. The nature of the order is a Final Order of the Division of Administrative Hearings Denying the Petition for Unpromulgated Rule Challenge.

Respectfully Submitted this 12th Day of February, 2008



LARRY PHILLIPS
FCCC- 811
13613 S. E. Hwy. 70
Arcadia FL 34266

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true copy of the foregoing has been furnished to:
Gregory D. Venz, Assistant General Counsel, Department of Children and
Families, 1317 Winewood Boulevard, Building #2, Room #204, Tallahassee,
Florida 32399-0700, by placing it into the FCCC facility mailbox on this 12th day
of February, 2008.

By:  _____
LARRY PHILLIPS

DIVISION OF ADMINISTRATIVE HEARINGS
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LARRY PHILLIPS,
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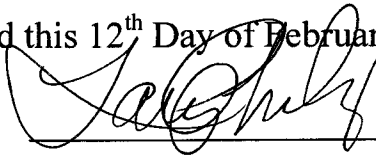
FLORIDA DEPARTMENT OF
CHILDREN AND FAMILIES,
Appellee,

I hereby certify that this document is a true and correct copy.
By: Elma Williams
Date: Feb 19, 2008
CLERK'S OFFICE, DIVISION OF ADMINISTRATIVE HEARINGS

NOTICE OF APPEAL

NOTICE IS GIVEN that LARRY PHILLIPS, Appellant, appeals to the First District Court of Appeal the Order of this Division rendered January 16, 2008. The nature of the order is a Final Order of the Division of Administrative Hearings Denying the Petition for Unpromulgated Rule Challenge.

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of February, 2008.

By:  _____
LARRY PHILLIPS

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

Notice to Applicant: If you qualify for civil indigence you must enroll in the Clerk's Office payment plan and pay a one-time administrative fee of \$25.00.

1. I have Ø dependents. (Do not include children not living at home and do not include a working spouse or yourself.)

2. I have a take home income of \$ Ø paid () weekly () bi-weekly () semi-monthly () monthly () yearly

(Take home income equals salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court ordered support payments)

3. I have other income paid () weekly () bi-weekly () semi-monthly () monthly () yearly: (Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No"). \$Yes _____ (No)

Social Security benefits..... Yes \$ _____ (No)

Veterans' benefit..... Yes \$ _____ (No)

Unemployment compensation..... Yes \$ _____ (No)

Child support or other regular support from family Yes \$ _____ (No)

Union Funds..... Yes \$ _____ (No)

Members/ spouse..... Yes \$ _____ (No)

Workers compensation... Yes \$ _____ (No)

Rental income..... Yes \$ _____ (No)

Retirement/pensions ... Yes \$ _____ (No)

Dividends or interest. Yes \$ _____ (No)

Trusts or gifts..... Yes \$ _____ (No)

Other kinds of income not on the list Yes \$ _____ (No)

4. I have other assets: (Circle "yes" and fill in the value of the property, otherwise circle "No")

Cash..... Yes \$ _____ (No)

Savings..... Yes \$ No

Bank account(s)..... Yes \$ _____ No

Stocks/bonds..... Yes \$ _____ No

Certificates of deposit or money market accounts..... Yes \$ _____ No

*Equity in Real estate (excluding homestead). Yes \$ _____ No

*Equity in Motor vehicles/Boats/Other. Yes _____ No

Tangible property Yes \$ _____ *include expectancy of an interest in such property No

Market accounts. \$ Yes _____ No

5. I have a total amount of liabilities and debts in the amount of \$ N/A.

6. I have a private lawyer in this case... Yes No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 57.082, F.S. commits a misdemeanor of the first degree, punishable as provided in s.775.082, F.S. or s. 775.083, F.S. I attest that the information I have provided on this application is true and accurate to the best of my knowledge.

Signed this 12th day of February, 2007
Signature of Applicant for Indigent Status. [Handwritten Signature]

Date of Birth. 8/18/1947 Print Full Name: Larry Phillips

N/A
Drivers License or ID Number

FCCC, 13613 S. E. Hwy. 70, Arcadia FL 34266
Address, P O Address, Street, City, State, Zip Code

Phone number: (863) 491-6108

NOTICE: If the applicant is determined by the clerk to be Not Indigent, you may seek judicial review by filing a petition with the court.

CLERK'S DETERMINATION

Based on the information in this Application, I have determined the applicant to be () Indigent

() Not indigent, according to s. 57.082, F.S.

Dated this ___ day of _____, 2005

Clerk of the Circuit Court

This form was completed with the assistance of

_____ Clerk/Deputy Clerk/Other

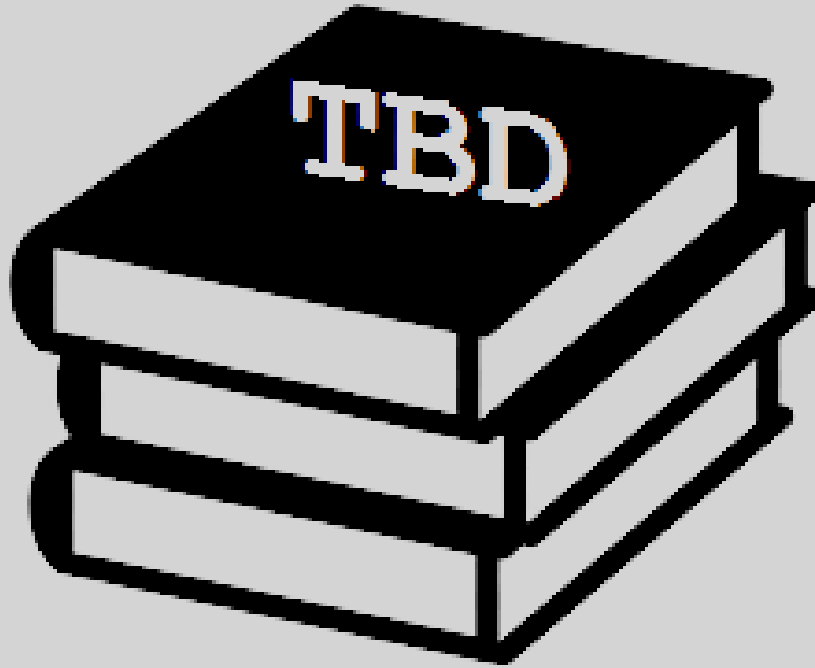
FL ORDER 13 C.O. 13

**SUPREME COURT OF FLORIDA
FL ORDER 05-13, IN RE: APPROVAL OF APPLICATION FOR DETERMINATION
OF INDIGENT STATUS FORMS FOR USE BY CLERKS;**

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