

PETITION TO ESTABLISH LEGAL DECISION-MAKING, PARENTING TIME & CHILD SUPPORT



PINAL COUNTY

Establish an Order through the Court Regarding Legal Decision-Making, Parenting Time and Child Support

INSTRUCTIONS AND FORMS

**Provided as a Public Service by
CHAD A. ROCHE
Clerk of the Superior Court**

Name of Person Filing: _____
Street Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Email Address: _____
ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

Regarding the Matter of:

Name of Petitioner

CASE NUMBER: DO2

**PETITION TO ESTABLISH
(Check One Box Only)**

**LEGAL DECISION-MAKING AND
PARENTING TIME (ONLY)**

**LEGAL DECISION-MAKING, PARENTING
TIME AND CHILD SUPPORT**

Name of Respondent

HONORABLE: _____

GENERAL INFORMATION:

1. INFORMATION ABOUT THE PERSON FILING THIS PETITION TO ESTABLISH LEGAL DECISION-MAKING

Name: _____

Address: _____

County of Residence: _____

Date of Birth: _____

Occupation: _____

Relationship to children for whom I want the LEGAL DECISION-MAKING / PARENTING TIME order:

Mother

Father

Other: (explain): _____

2. INFORMATION ABOUT THE OTHER PARTY:

Name: _____

Address: _____

County of Residence: _____

Date of Birth: _____

Occupation: _____

Relationship to children for whom I want the LEGAL DECISION-MAKING / PARENTING TIME order:

- Mother
- Father
- Other: (explain): _____

3. JURISDICTION: WHY I AM FILING THIS COURT CASE IN ARIZONA AGAINST THE OTHER PERSON: (check all that apply)

- The person is a resident of Arizona.
- I believe that I will personally serve the person in Arizona (see "Service" packet for information).
- The person agrees to have the case heard here and will file a written papers in the court case.
- The person lived with the minor child(ren) in this state at some time.
- The minor child(ren) lives in this state as a result of the acts or directions of the person.
- The person had sexual intercourse in this state as a result of which the minor child may have been conceived in Arizona.
- The person signed an acknowledgment of paternity that is filed in this state.
- The person did any other acts that substantially connect the person with this state (see a lawyer to help you determine this).

4. INFORMATION ABOUT CHILD(REN) FOR WHOM I WANT THE LEGAL DECISION-MAKING AND PARENTING TIME ORDER:

Name: _____ Name: _____

Birth Date: _____ Birth Date: _____

Current Address: _____ Current Address: _____

County of Residence: _____ County of Residence: _____

Name: _____ Name: _____

Birth Date: _____ Birth Date: _____

Current Address: _____ Current Address: _____

County of Residence: _____ County of Residence: _____

STATEMENT ABOUT PATERNITY AND CHILD SUPPORT

5. PATERNITY WAS ESTABLISHED BY: (Check one box).

(A copy of any Order or document referenced here should be attached if not already in court file.)

A Court Order for Paternity from this county or previously transferred to this county stating that _____ is the natural father of the child(ren). (A.R.S. §25-502 (c)).

Both parents signing an Acknowledgment of Paternity through the Hospital Program or other means provided by law after July 18, 1996, and a birth certificate listing the name of the father was issued as a result.

Parties were legally married when child(ren) was (were) born, conceived or adopted.*

***Note: If married when child(ren) born, conceived or adopted, and no Decree of Divorce or Separation has been issued, STOP!! Do not use these forms. Request for legal decision-making and visitation (parenting time) must generally be filed as part of a case for Separation or Divorce.**

6. INFORMATION ABOUT CHILD SUPPORT FOR CHILDREN: (Check one box).

A Child Support Order was entered on (date) _____ from (name of court) _____, case no. _____ which states that child support established and does not need to be changed.

Order that child support shall be paid by Petitioner, _____ or Respondent, _____ in a reasonable amount as determined by the court under the Arizona Child Support Guidelines as described in the submitted Parent's Worksheet. Support payments shall begin on the first day of the first month following the entry of Legal decision-making / Parenting Time Order.

OTHER STATEMENTS TO THE COURT:

- 7. **OTHER EXPENSES:** The parties should be ordered to divide between then any uninsured medical, dental, or health expenses, reasonably incurred for the minor child(ren), in proportion to their respective incomes.
- 8. **DOMESTIC VIOLENCE:** (check if you are asking for joint legal decision-making; this statement **must be true** about you)
 Domestic violence has not occurred between the parties.
- 9. **VENUE:** This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the petitioner, or the respondent, or the minor child(ren).

REQUEST I MAKE TO THE COURT IN THIS LAWSUIT:

- 1. **LEGAL DECISION-MAKING OF MINOR CHILDREN:** (check and complete A or B).

A. SOLE LEGAL DECISION-MAKING: Sole legal decision-making of the minor child(ren) awarded to Mother _____ or Father, _____ and the other parent subject to reasonable parenting time as follows:

- a. Reasonable parenting time rights to the parent not having legal decision-making described in the Parenting Plan submitted.
- b. Check and explain **ONLY** if you want the other parent to have Supervised Parenting time or NO Parenting time:
 Supervised Parenting Time between the children and Mother or Father **OR**
 NO Parenting Time between the children and Mother or Father

It is in the best interest of the children, pursuant to A.R.S. Section 25-337 and 25-338, because: (explain here reasons for supervised or no parenting time).

Person to supervise: _____

Request restrictions on parenting time: (explain here)

The cost of supervised parent/child access shall be paid by:

- The parent being supervised;
- The parent having legal decision-making;
- Shared equally by the parties.

B. JOINT LEGAL DECISION-MAKING: Joint Legal Decision-Making. Petitioner and Respondent **agree** to act as joint custodians of the minor child(ren), as set forth in the Joint Legal Decision-Making Agreement contained in the Parenting Plan, signed and agreed upon by both parties, if the Court adopts the terms of the Agreement. There have been **no** significant acts of Domestic Violence under A.R.S. 13-3601, by either parent.

Check Below If You Are Asking For A Child Support Order Or Change Of Child Support In This Case:

2. CHILD SUPPORT

Mother **Father** should pay child support to the other party in the amount of \$ _____ per month on the first day of every month based upon the “**Parent’s Worksheet**” filed with Petition to Modify Parenting time. All child support payments should be made through the Child Support Clearinghouse and will be subject to an applicable statutory fee through an automatic Order of Assignment.

3. MEDICAL, DENTAL and VISION INSURANCE PAYMENTS AND EXPENSES

Mother is responsible for providing: Medical dental vision care insurance.

Father is responsible for providing: Medical dental vision care insurance.

Parties should be ordered to pay for all reasonable unreimbursed medical, dental, health-related expenses incurred for the child(ren) in proportion to their respective incomes or _____ % by Mother and _____ % by Father.

4. Other Request:

OATH OR AFFIRMATION

THE CONTENTS OF THIS DOCUMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date

Signature

State of Arizona)

County of _____)

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20 _____

by _____
Name of Signer

Commission Expires

Notary Public

Arizona Superior Court, Pinal County Family Court Cover Sheet

Pursuant to Rule 4.1 Superior Court Local Rules - Pinal County, please provide the following information. *(Type or print)*

CASE NUMBER <u>DO 2</u> ATLAS NUMBER(S) _____	Judge _____
--	-------------

<p style="text-align: center;">PETITIONER'S NAME AND ADDRESS</p> Name: _____ Address: _____ City/State/Zip: _____ Phone Number: _____ Email Address: _____ DOB: _____	<p style="text-align: center;">RESPONDENT'S NAME AND ADDRESS</p> Name: _____ Address: _____ City/State/Zip: _____ Phone Number: _____ Email Address: _____ DOB: _____
---	---

<p style="text-align: center;">PETITIONER'S ATTORNEY</p> Name/State Bar #: _____ Address: _____ City/State/Zip: _____ Phone Number: _____	<p style="text-align: center;">EMERGENCY ORDER SOUGHT</p> <input type="checkbox"/> Order of Protection <input type="checkbox"/> Temporary Order <input type="checkbox"/> Other _____ (Specify)
---	---

<p>Do you or the other party need an interpreter?</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p> If yes, what language: _____	<p>FEES: <input type="checkbox"/> PAID <input type="checkbox"/> NOT PAID - REASON</p> <p style="margin-left: 40px;"> <input type="checkbox"/> Political Subdivision/Government Agency <input type="checkbox"/> Deferred <input type="checkbox"/> Waived </p>
---	---

ACTION REQUESTED Check only one box

- DISSOLUTION (Divorce)
- D01 With Children
- D02 Without Children

- D11 Legal Separation
- D12 Paternity/Maternity
- D13 Annulment
- D14 Legal Decision-Making
- D15 Order of Protection
- D16 Foreign Judgment
- D17 Domesticated Decree
- D18 Foreign Judgment for Legal Decision-Making
- D19 Establish Support
- D20 Habeas Corpus
- D21 Visitation
- D40 Emergency Order of Protection
- D22 Other _____
(Specify)

Name of Person Filing: _____
 Telephone Number: _____
 Email Address: _____
 ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
 If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
 PINAL COUNTY**

 Name of Petitioner

CASE NUMBER: _____

**SENSITIVE DATA SHEET
 (CONFIDENTIAL RECORD)**

 Name of Respondent

HONORABLE: _____

Fill out. File with Clerk of Court. Social Security Numbers should appear on this form only and should be omitted from other court forms. Access Confidential pursuant to A.R.F.L.P. 43(G)(1).

A.	Personal Information:	Petitioner	Respondent
	Name	_____	_____
	Gender	<input type="checkbox"/> Male or <input type="checkbox"/> Female	<input type="checkbox"/> Male or <input type="checkbox"/> Female
	Date of Birth (Month/Day/Year)	_____	_____
	Social Security Number	_____	_____
	Driver's License Number	_____	_____

WARNING: DO NOT INCLUDE MAILING ADDRESS ON THIS FORM IF REQUESTING ADDRESS PROTECTION

Mailing Address	_____	_____
City, State, Zip Code	_____	_____
Contact Phone	_____	_____
Email Address	_____	_____
Current Employer Name	_____	_____
Employer Address	_____	_____
Employer City, State, Zip Code	_____	_____
Employer Telephone Number	_____	_____
Employer Fax Number	_____	_____

B. Child(ren) Information:			
Child Name	Gender	Child Social Security Number	Child Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Clerk of Court Issued:

***For Court Use Only. NOT Public Record. Do NOT Provide A Copy Of This Document To The Other Party.**

Name of Person Filing: _____
Street Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Email Address: _____
ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

Name of Petitioner

CASE NUMBER: _____

Name of Respondent

PARENTING PLAN FOR:

- JOINT LEGAL DECISION-MAKING WITH
JOINT LEGAL DECISION-MAKING
AGREEMENT
or
 SOLE LEGAL DECISION-MAKING
- To Mother
 To Father

INSTRUCTIONS

This document has 4 parts: PART 1) General Information PART 2) Legal Decision-Making and Parenting Time PART 3) Danger to Children Notification Statement, and PART 4) Joint Legal Decision-Making Agreement. Where this form refers to “children” it refers to any and all minor children common to the parties whether one or more.

One or both parents must complete and sign the Plan as follows:

- a. If only *one* parent is submitting the Plan; that parent must sign at the end of PART 2 and 3.
- b. If both parents agree to Legal Decision-Making and parenting time arrangements *but not to joint Legal Decision-Making*: Both parents must sign the Plan at the end of PART 2 and 3.
- c. If both parents agree to joint Legal Decision-Making and parenting time arrangements as presented in the Plan: Both parents must sign the Plan at the end of PART 2, 3, and 4.

PART 1: GENERAL INFORMATION:

A. MINOR CHILDREN. This Plan concerns the following children: (Use additional paper if necessary).

_____	_____
_____	_____
_____	_____

B. THE FOLLOWING LEGAL DECISION-MAKING ARRANGEMENT IS REQUESTED:

(Choose ONE of 1, 2, 3 4.) (If you chose "sole Legal Decision-Making" [1 or 2], you have the option of also requesting restrictions on parenting time of the other party.)

1. SOLE LEGAL DECISION-MAKING BY AGREEMENT. The parents agree that Sole Legal Decision-Making and primary physical Legal Decision-Making should be granted to Mother Father.

The parents agree that since each has a unique contribution to offer to the growth and development of their minor children, each of them will continue to have a full and active role in providing a sound moral, social, economic, and educational environment for the benefit of the minor children, as described in the following pages,

OR

2. SOLE LEGAL DECISION-MAKING REQUESTED BY THE PARENT SUBMITTING THIS PLAN.

The parents cannot agree to the terms of Legal Decision-Making and parenting time. The parent submitting this Plan asks the court to order sole Legal Decision-Making and parenting time according to this Plan.

(Optional, if you marked 1 or 2 above)

RESTRICTED, SUPERVISED, OR NO PARENTING TIME.

The parent submitting this Plan asks the court for an order restricting parenting time. The facts and information related to this request are described in the Petition.

OR

3. JOINT LEGAL DECISION-MAKING BY AGREEMENT. The parents agree to joint Legal Decision-Making and request the court to approve the joint Legal Decision-Making arrangement as described in this Plan. Primary physical Legal Decision-Making will be with Mother Father,

OR

4. JOINT LEGAL DECISION-MAKING REQUESTED BY THE PARENT SUBMITTING THIS PLAN.

The parents cannot agree to the terms of Legal Decision-Making and parenting time or are unable to submit this plan together at this time. My request for Joint Legal Decision-Making is deferred for the court's determination.

PART 2: LEGAL DECISION-MAKING AND PARENTING TIME. Complete each section below.

Be specific about what you want the judge to approve in the court order.

A. (School Year) WEEKDAY AND WEEKEND TIME-SHARING SCHEDULE:

The children will be in the care of the Father as follows: (Explain)

The children will be in the care of the Mother as follows: (Explain)

Other Legal Decision-Making arrangements are as follows: (Explain)

Transportation will be provided as follows:

Mother or **Father** will pick up the children up at _____ o'clock.

Mother or **Father** will pick up the children up at _____ o'clock.

Parents may change their time-share arrangements by mutual agreement with at least _____ days notice in advance to the other parent.

B. SUMMER MONTHS OR SCHOOL BREAK LONGER THAN 4 DAYS: The weekday and weekend schedule described above will apply for all 12 calendar months **EXCEPT:**

During summer months or school breaks that last longer than 4 days, no changes shall be made.

OR,

During summer months or school breaks that last longer than 4 days, the minor children will be in the care of Father: (Explain).

During summer months or school breaks that last longer than 4 days, the minor children will be in the care of Mother: (Explain).

Each parent is entitled to a _____ week period of vacation time with the minor children. The parents will work out the details of the vacation at least _____ days in advance.

C. TRAVEL:

Should either parent travel out of the area with the minor children, each parent will keep the other parent informed of travel plans, address(es), and telephone number(s) at which that parent and the minor children can be reached.

Neither parent shall travel with the minor children outside Arizona for longer than _____ days without the prior written consent of the other parent or order of the court.

D. HOLIDAY SCHEDULE: The holiday schedule takes priority over the regular time-sharing schedule as described above. Check the box(es) that apply and indicate the years of the holiday access / Parenting time schedule.

Holidays

Even Years

Odd Years

<input type="checkbox"/>	New Year's Eve	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	New Year's Day	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Spring Vacation	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Easter	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	4 th of July	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Halloween	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Veteran's Day	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Thanksgiving	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Hanukkah	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Christmas Eve	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Christmas Day	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Winter Break	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
<input type="checkbox"/>	Child's Birthday	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Father

Mother's Day will be celebrated with the Mother every year.

Father's Day will be celebrated with the Father every year.

Each parent may have the children on his or her birthday.

Three-day weekends which include Martin Luther King Day, President's Day, Memorial Day, Labor Day, Columbus Day, the children will remain in the care of the parent who has the minor children for the weekend.

Other Holidays (Describe the other holidays and the arrangement.)

Telephone Contact: Each parent may have telephone contact with the minor children during the child(ren)'s normal waking hours, **OR:** (Explain)

Other (Explain):

E. PARENTAL ACCESS TO RECORDS AND INFORMATION: Under Arizona law (A.R.S. §25-403), unless otherwise provided by court order or law, on reasonable request, both parents are entitled to have equal access to documents and other information concerning the minor children's education and physical, mental, moral and emotional health including medical, school, police, court and other records. A person who does not comply with a reasonable request for these records shall reimburse the requesting parent for court costs and attorney fees incurred by that parent to make the other parent obey this request. A parent who attempts to restrict the release of documents or information by the custodian of the records without prior court order is subject to legal sanctions.

F. EDUCATIONAL ARRANGEMENTS:

Both parents have the right to participate in school conferences, events and activities, and the right to consult with teachers and other school personnel.

Both parents will make major educational decisions together. (Optional) If the parents do not reach agreement, then: _____

OR

Major educational decisions will be made by Mother Father after consultation other parent.

G. MEDICAL AND DENTAL ARRANGEMENTS:

Both parents have the right to authorize emergency medical treatment, if needed, and the right to consult with physicians and other medical practitioners. Both parents agree to advise the other parent immediately of any emergency medical/dental care sought for the minor children, to cooperate on health matters concerning the children and to keep one another reasonably informed. Both parents agree to keep each other informed as to names, addresses and telephone numbers of all medical/dental care providers.

Both parents will make major medical decisions together, except for emergency situations as noted above. (optional) If the parents do not reach an agreement, then: _____

OR

Major medical/dental decisions will be made by Mother Father after consultation other parent.

H. RELIGIOUS EDUCATION ARRANGEMENTS: (Choose ONE)

Each parent may take the minor children to a church or place of worship of his or her choice during the time that the minor children is/are in his or her care.

Both parents agree that the minor children may be instructed in the _____ faith.

Both parents agree that religious arrangements are not applicable to this plan.

I. ADDITIONAL ARRANGMENTS AND COMMENTS:

NOTIFY OTHER PARENT OF ADDRESS CHANGE. Each parent will inform the other parent of any change of address and/or phone number in advance **OR** within _____ days of the change.

NOTIFY OTHER PARENT OF EMERGENCY. Both parents agree that each parent will promptly inform the other parent of any emergency or other important event that involves the minor children.

TALK TO THE OTHER PARENT ABOUT EXTRA ACTIVITIES. Each parent will consult and agree with the other parent regarding any extra activity that affects the minor children's access to the other parent.

ASK OTHER PARENT IF HE/SHE WANTS TO TAKE CARE OF THE CHILDREN. Each parent agrees to consider the other parent as care-provider for the minor children before making other arrangements.

OBTAIN WRITTEN CONSENT OR COURT ORDER BEFORE MOVING. The notice required by this section shall be made by certified mail, return receipt requested, or pursuant to the Arizona rules of family law procedure. The court shall sanction a parent who, without good cause, does not comply with the notification requirements of this subsection. The court may impose a sanction that will affect legal decision-making or parenting time only in accordance with the child's best interests. **A.R.S. 25-408 (B)**

COMMUNICATE. Each parent agrees that all communication regarding the minor children will be between the parents and that they will **not** use the minor children to convey information or to set up parenting time changes.

PRAISE OTHER PARENT. Each parent agrees to encourage love and respect between the minor children and the other parent and neither parent shall do anything that may hurt the other parent's relationship with the minor children.

COOPERATE AND WORK TOGETHER. Both parents agree to exert their best efforts to work cooperatively in future plans consistent with the best interests of the minor children and to amicably resolve such disputes as may arise.

NOTIFY OTHER PARENTS OF PROBLEMS WITH TIME-SHARING AHEAD OF TIME. If either parent is unable to follow through with the time-sharing arrangements involving the minor child(ren), that parent will notify the other parent as soon as possible.

PARENTING PLAN. Both parents agree that if either parent moves out of the area and returns later, they will use the most recent "**Parenting Plan/Access Agreement**" in place before the move.

MEDIATION. If the parents are unable to reach a mutual agreement regarding a legal change to their parenting orders, they may request mediation through the court or a private mediator of their choice.

NOTICE: DO NOT DEVIATE FROM PLAN UNTIL DISPUTE IS RESOLVED.
Both parents are advised that while a dispute is being resolved, neither parent shall deviate from this Parenting Plan. Or act in such a way that is inconsistent with the terms of this agreement.
Once this Plan has been made an order of the Court, if either parent disobeys the court order related to parenting time with the children, the other parent may submit court papers to request enforcement.

J. PART 2 SIGNATURE OF ONE OR BOTH PARENTS (as instructed on page 1)

Signature of Mother: _____ Date: _____

Signature of Father: _____ Date: _____

PART 3: STATEMENT REGARDING CONTACT WITH SEX OFFENDERS AND PERSONS CONVICTED OF DANGEROUS CRIMES AGAINST CHILDREN.

According to A.R.S. §25-403.05, a child’s parent or custodian must immediately notify the other parent or custodian if the person knows that a convicted or registered sex offender or someone who has been convicted of a dangerous against children may have access to the child.

According to A.R.S. §13-705 (P) (1), “Dangerous crime against children” means any of the following that is committed against a minor who is under fifteen years of age:

- (a) Second degree murder.
- (b) Aggravated assault resulting in serious physical injury or involving the discharge, use or threatening exhibit on of a deadly weapon or dangerous instrument.
- (c) Sexual assault.
- (d) Molestation of a child.
- (e) Sexual conduct with a minor.
- (f) Commercial sexual exploitation of a minor.
- (g) Sexual exploitation of a minor.
- (h) Child abuse as prescribed in section 13-3623, subsection A, paragraph 1.
- (i) Kidnapping.
- (j) Sexual abuse.
- (k) Taking a child for the purpose of prostitution as prescribed in section 13-3206.
- (l) Child prostitution as prescribed in section 13-3212.
- (m) Involving or using minors in drug offenses.
- (n) Continuous sexual abuse of a child.
- (o) Attempted first degree murder.
- (p) Sex trafficking.
- (q) Manufacturing methamphetamine under circumstances that causes physical injury to a minor.
- (r) Bestiality as prescribed in section 13-1411, subsection A, paragraph 2.
- (s) Luring a minor for sexual exploitation.
- (t) Aggravated luring a minor for sexual exploitation.
- (u) Unlawful age misrepresentation.

The parent or custodian must provide notice by first class mail, return receipt requested, by electronic means to an electronic mail address that the recipient provided to the parent or custodian for notification purposes or by another form of communication accepted by the court.

PART 3 SIGNATURE OF ONE OR BOTH PARENTS (as instructed on page 1)

I/We have read, understand, and agree to abide by the requirements of A.R.S. §25-403.05(B) concerning notification of other parent or custodian if someone convicted of dangerous crime against children may have access to the child.

Signature of Mother: _____ **Date:** _____

Signature of Father: _____ **Date:** _____

PART 4: JOINT LEGAL DECISION-MAKING AGREEMENT (IF APPLICABLE):

A. DOMESTIC VIOLENCE: Arizona Law (A.R.S. §25-403.03) states that joint Legal Decision-Making shall NOT be awarded if there has been “a history of significant domestic violence”.

Domestic Violence has **not** occurred between the parties,

OR

Domestic Violence **has** occurred but it has not been “significant” or has been committed by both parties.*

B. DUI or DRUG CONVICTIONS:

Neither party has been convicted of driving under the influence or a drug offense within the past 12 months,

OR

One of the parties HAS been convicted of driving under the influence or a drug offense within the past 12 months but the parties feel Joint Legal Decision-Making is in the best interest of the children.*

• **IF THERE HAS BEEN DOMESTIC VIOLENCE OR A DUI OR DRUG CONVICTION:**

Attach an extra page explaining why Joint Legal Decision-Making is still in the best interest of the children.

C. JOINT LEGAL DECISION-MAKING AGREEMENT: If the parents have agreed to joint Legal Decision-Making, the following will apply, subject to approval by the Judge:

1. **REVIEW:** The parents agree to review the terms of the / this agreement and make any necessary or desired changes every _____ months from the date of this document.

2. **CRITERIA.** Our joint Legal Decision-Making agreement meets the criteria required by Arizona law A.R.S. §25-403.02, as listed below:

a. The best interest of the minor children are served;

b. Each parent's rights and responsibilities for personal care of the minor children and for decisions in education, health care and religious training are designated in this Plan;

c. A schedule of the physical residence of the minor children,, including holidays and school vacations is included in the Plan;

d. The Plan includes a procedure for periodic review;

e. The Plan includes a procedure by which proposed changes, disputes and alleged breaches may be mediated or resolved;

f. A procedure for communicating with each other about the child, including methods and frequency.

PART 4 SIGNATURE OF BOTH PARENTS REQUESTING JOINT LEGAL DECISION-MAKING (as instructed on page 1)

Signature of Mother: _____ **Date:** _____

Signature of Father: _____ **Date:** _____

Name of Person Filing: _____
 Street Address: _____
 City, State, Zip Code: _____
 Telephone Number: _____
 Email Address: _____
 ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
 If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
 PINAL COUNTY**

_____ CASE NUMBER: DO2
 Name of Petitioner

**AFFIDAVIT REGARDING
 MINOR CHILDREN**

_____ HONORABLE: _____
 Name of Respondent

NOTICE: This *"Affidavit Regarding Minor Children"* is required for all legal decision-making cases. You must fill out this Affidavit completely, and provide accurate information. Use additional paper if necessary. You must give copies of this Affidavit and all other required documents to the other party, and to the judge.

1. CHILDREN OF THE PARTIES WHO ARE UNDER 18 YEARS OLD. The following child(ren) are under age 18 and were born to, or adopted by, me and the other party:

Name: _____	Name: _____
Birth Date: _____ Age: _____	Birth Date: _____ Age: _____
Name: _____	Name: _____
Birth Date: _____ Age: _____	Birth Date: _____ Age: _____

2. INFORMATION REGARDING WHERE THE CHILDREN UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS: (Attach additional pages if necessary)

Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with _____
City, State: _____	Relationship to Child: _____
Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with _____
City, State: _____	Relationship to Child: _____
Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with _____
City, State: _____	Relationship to Child: _____

Child's Name: _____
Address: _____
City, State: _____

Dates: From _____ To _____
Lived with _____
Relationship to Child: _____

3. COURT CASES IN WHICH I HAVE BEEN A PARTY/WITNESS THAT INVOLVED THE LEGAL DECISION-MAKING PARENTING TIME OF THE CHILD(REN): (Check one box)

I have or I have not been a party/witness in court in this state or in any other state that involved the legal decision-making and parenting time of the child(ren) named above. (If so, explain on separate paper. If not, go on.)

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

4. INFORMATION REGARDING PENDING COURT CASES RELATED TO THE LEGAL DECISION-MAKING OF THE CHILD(REN): (Check one box)

I do have or I do not have information about a legal decision-making and parenting time court case relating to any of the children named above that is pending in this state or in any other state. (If so, explain. If not, go on.)

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

5. LEGAL DECISION-MAKING OR PARENTING TIME CLAIMS OF ANY PERSON: (Check one box)

I do know or I do not know a person other than the Petitioner or the Respondent who has physical legal decision-making or who claims legal decision-making or parenting time rights to any of the children named in this Affidavit.
(If so, explain below. If not, go on.)

Name of each child: _____
Name of person with the claim: _____
Address of person with the claim: _____
Nature of the claim: _____

OATH OR AFFIRMATION AND VERIFICATION:

I swear or affirm that the information on this document is true and correct under penalty of perjury.

_____ **Date**

_____ **Signature**

State of Arizona)

County of _____)

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20 _____

by _____
Name of Signer

_____ **Commission Expires**

_____ **Notary Public**

Name of Person Filing: _____
 Street Address: _____
 City, State, Zip Code: _____
 Telephone Number: _____
 Email Address: _____
 ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
 If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
 PINAL COUNTY**

_____ CASE NUMBER: DO2
 Name of Petitioner

SUMMONS

_____ HONORABLE: _____
 Name of Respondent

WARNING: This is an official document from the court that affects your rights. Read this carefully. If you do not understand it, contact a lawyer for help.

FROM THE STATE OF ARIZONA TO _____
 Name of Respondent

1. A lawsuit has been filed against you. A copy of the lawsuit and other court papers are served on you with this **“Summons.”**
2. If you do **not** want a judgment or order taken against you without your input, you must file an **“Answer”** or a **“Response”** in writing with the court, and pay the filing fee. If you do **not** file an **“Answer”** or **“Response”** the other party may be given the relief requested in his/her Petition or Complaint. To file your **“Answer”** or **“Response”** take, or send, the **“Answer”** or **“Response”** to the Office of the Clerk of the Superior Court, 971 Jason Lopez Circle Bldg A , Florence, Arizona 85132 or PO Box 2730, Florence, Arizona 85132-2730; or any satellite office. Mail a copy of your **“Response”** or **“Answer”** to the other party at the address listed on the top of this Summons.
3. If this **“Summons”** and the other court papers were served on you by a registered process server or the Sheriff, **within** the State of Arizona, your **“Response”** or **“Answer”** must be filed within **TWENTY (20) CALENDAR DAYS** from the date you were served, **not counting the day you were served**. If this **“Summons”** and the other papers were served on you by a registered process server or the Sheriff **outside** the State of Arizona, your Response must be filed within **THIRTY (30) CALENDAR DAYS** from the date you were served, **not counting the day you were served**. Service by a registered process server or the Sheriff is complete when made. Service by Publication is complete thirty **(30)** days after the date of the first publication.

4. You can get a copy of the court papers filed in this case from the Petitioner at the address at the top of this paper, or from the Clerk of the Superior Court at the address listed in Paragraph 2 above.
5. If this is an action for dissolution (divorce), legal separation or annulment, either or both spouses may file a Petition for Conciliation for the purpose of determining whether there is any mutual interest in preserving the marriage or for Mediation to attempt to settle disputes concerning legal decision-making and parenting time issues regarding minor children.
6. Requests for reasonable accommodation for persons with disabilities must be made to the office of the judge or commissioner assigned to the case, at least five **(5)** days before your scheduled court date.

GIVEN UNDER MY HAND AND SEAL OF THE COURT

_____ **Date**

CHAD A. ROCHE
Clerk of the Superior Court

By

_____ **Deputy Clerk**

CHILD SUPPORT CALCULATOR



The Court Help website offers a Free Child Support Calculator.

◆ Simple ◆ Quick ◆ Accurate

If you have a personal computer with Internet access, you can access the Child Support Calculator at:

<http://www.azcourts.gov/familylaw>

Calculate Support

Your computer must be attached to a printer. The Child Support Entry Form will open in Adobe Acrobat Reader. Begin by clicking the appropriate button for the Custodial Parent, then press the Tab button on your keyboard to move through the form, or click on each line with your mouse.

Enter the appropriate information on each blank. Not every blank needs to be completed in every case. If you are not sure whether you should complete a blank, click on the word next to the blank. You will be directed to additional information along with a link to the appropriate section in the [Arizona Child Support Guidelines](#).

When you have completed the Entry Form, click the "Calculate Support" button to get an estimate of the amount of child support that the noncustodial parent may have to pay to the custodial parent for the support of their child(ren).

After clicking on "Calculate Support" the following forms will automatically be filled in with the information from the Entry Form. Print forms and bring with you at the time of filing your initial paperwork.

- Parent's Worksheet for Child Support Amount
- Child Support Order
- Income Withholding Order/Notice for Support

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

Regarding the Matter of:

Name of Petitioner

CASE NUMBER: DO2

ORDER FOR (check one box)

CHILD LEGAL DECISION-MAKING and PARENTING TIME (ONLY)

CHILD LEGAL DECISION-MAKING, PARENTING TIME and CHILD SUPPORT

Name of Respondent

HONORABLE: _____

THE COURT FINDS:

1. This case has come before this court for a final order, and if necessary the court has taken all testimony needed to enter a final Order.
2. This court has jurisdiction over the parties under the law.
3. Where it has the legal power to do so and where it is applicable to the facts of this case, this court has considered, approved, and made an Order relating to Child Legal Decision-Making, Child Support, Parenting Time and expenses related to the birth of the child(ren).

4. This Order applies to these child(ren):

CHILD(REN)'S NAME(S)

DATE OF BIRTH

5. PARENT INFORMATION PROGRAM.

- A. Petitioner has attended the Parent Information Program class as evidenced by the Certificate of Completion in the Court file, **OR**

Petitioner has not attended the Parent Information Program class and shall be denied any requested relief to enforce or modify this Order until Petitioner has completed the class.

- B. Respondent has attended the Parent Information Program class as evidenced by the Certificate of Completion in the Court file, **OR**

Respondent has not attended the Parent Information Program class and shall be denied any requested relief to enforce or modify this Order until Respondent has completed the class.

6. **DEVIATION FROM CHILD SUPPORT.** The Court, having considered the best interests of the child(ren), deviates from the guidelines for the following reasons:

- Application of the guidelines is inappropriate.
- Application of the guidelines is unjust.
- The parties have signed a written agreement with knowledge of the amount of support that would have been ordered by the guidelines but for the agreement.

THE COURT MAKES THE FOLLOWING FINDING REGARDING THE DEVIATION:

- The child support order would have been \$ _____
- The child support order after deviation is \$ _____
- All parties have signed the agreement free of duress and coercion.

7. **PHYSICAL LEGAL DECISION-MAKING ADJUSTMENT, COURT APPROVED DISCRETIONARY PARENTING TIME ADJUSTMENT AND/OR OTHER ADJUSTMENTS. (THE COURT MUST MAKE WRITTEN FINDINGS IF ANY OF THESE ADJUSTMENTS ARE MADE.)**

8. **SUPERVISED OR NO PARENTING TIME.** (if applicable)

- Supervised parenting time** between the child(ren) and Petitioner OR Respondent **OR**
- Other
- No parenting time** between child(ren) and Petitioner OR Respondent or Other is in the best interests of the child(ren) for the following reasons:

9. **DRUG CONVICTION WITHIN LAST TWELVE MONTHS:**

- If either party has been convicted of driving under the influence of alcohol or drugs, or was convicted of any drug offense within 12 months of filing the request for legal decision-making, the legal decision-making, and or parenting time arrangement ordered by this court appropriately protects the child(ren).

THE COURT ORDERS:

1. **CHILD LEGAL DECISION-MAKING AND PARENTING TIME :**

A. SOLE LEGAL DECISION-MAKING:

- Sole legal decision-making of the minor child(ren) is awarded to:
- Mother or Father as primary custodial parent, subject to parenting time as follows:

- (1) Parenting time to the parent not having legal decision-making according to the Parenting Plan attached to and made a part of this Order. **OR**

- (2) **Supervised parenting time** to Mother or Father according to the terms of the Parenting Plan attached to and made a part of this Order, but only in the presence of another person name below or otherwise approved by the court.

Name of supervisor: _____

Restriction on parenting time: _____

The cost of supervised parenting time shall be paid by:

Mother or Father or shared equally by the parties.

OR

- (3) **No parenting time** rights to Mother or Father based on the findings above.

OR

B. JOINT LEGAL DECISION-MAKING:

- Petitioner and Respondent agree to act as joint custodians of the child(ren), as set forth in the Joint Legal Decision-Making Agreement and Parenting Plan pursuant to A.R.S. Section 25-332, signed by both parties and attached to and made a part of this Order. There have been no significant acts of Domestic Violence under A.R.S. 13-3601 by either parent. The Court adopts the agreed terms of the Joint Legal Decision-Making Agreement. By attaching the Joint Legal Decision-Making Agreement and Parenting Plan to the Order, it becomes part of the final Order and carries the same legal weight as any other Order.

2. CHILD SUPPORT:

Mother or Father shall pay child support to the other party in the amount of \$_____ per month, beginning THE FIRST DAY OF THE MONTH following the signing of this Order, according to the Child Support Worksheet attached hereto and incorporated. All child support payments shall be made through the Support Payment Clearinghouse, P.O. Box 52107, Phoenix, Arizona 85072-2107, plus an applicable statutory fee. Payments shall be in equal installments made on the 1st and 15th of each month thereafter through an automatic wage assignment.

3. MEDICAL AND DENTAL INSURANCE, PAYMENTS, AND EXPENSES:

Mother or Father is ordered to provide medical and dental insurance for the minor child(ren) as provided for in the Child Support Worksheet attached hereto and incorporated by reference. The party ordered to pay for medical and dental insurance must keep the other party informed of the insurance company's name, address, and telephone number, and provide the other party with the documents necessary to submit insurance claims. Further, Mother is ordered to pay _____% and Father is ordered to pay _____% of all reasonable uncovered and/or uninsured medical, dental, prescription, and other health care expenses for the minor child(ren), including co-payments.

- 4. FINANCIAL INFORMATION EXCHANGES:** The parties shall exchange financial information (tax returns, spousal affidavits, earning statements and/or other related financial statements) every twenty-four months.

5. LIMITATION ON JURISDICTION: (check box if applicable)

- This court cannot make a legal order, without personal service on _____ (the other party) with respect to issues of child support, medical and dental insurance for the minor child(ren) or regarding costs relating to birth of the child(ren). The court reserves the right to enter such orders at such time as the court acquires personal jurisdiction over the Respondent.

6. OTHER ORDERS: This court makes further Orders relating to this matter as follows:

DONE IN OPEN COURT: _____
(Judge of the Superior Court)