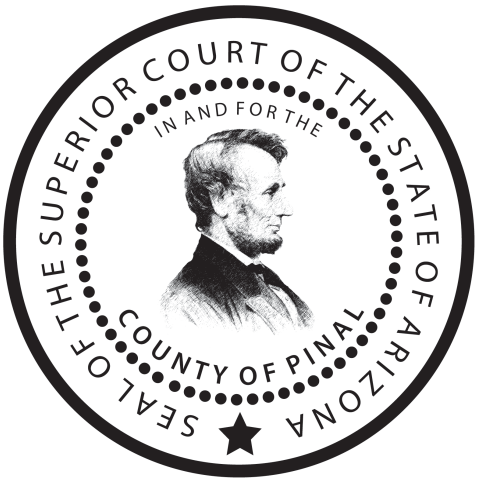
Revised 04.20.16

ESTABLISH PATERNITY, LEGAL DECISION-MAKING (CUSTODY), PARENTING TIME & CHILD SUPPORT



PINAL COUNTY

Instructions and Forms

Provided as a Public Service by
AMANDA STANFORD
Clerk of the Superior Court

TO ESTABLISH PATERNITY, LEGAL DECISION-MAKING (CUSTODY), PARENTING TIME & CHILD SUPPORT

CHECKLIST

You may use these forms in this packet if…

- ✓ You want a court order that declares paternity, legal decision-making (custody), parenting time and support for minor children, **AND**
- ✓ Paternity has NOT already been legally established for at least one of the children to be named in the court order, **AND**
- ✓ The same person is the father of all children to be included in the court order, **AND**
- ✓ The minor Children have lived in Arizona for at least **6** months (or since birth if younger than 6 months) before you file the petition, or you talked to a lawyer who advised that you could pursue the case in Arizona at this time.

DO NOT USE THE FORMS in the packet if:

- Someone other than the person named as the father in this case is already listed as the father on the birth certificate for any child for whom you are asking a court order for in this case.
- Paternity has already been legally established by other means for **ALL** children for whom you are seeking a court order in this matter.
    - *For children born after July 1996: if the father's name appears on the birth certificate as a result of the parents having signed an Affidavit of Paternity in the hospital at the time of birth or afterwards, paternity has already been established for that child and you do not need to establish paternity through the court.*

You have permission to use these documents for any lawful purpose. These forms shall not be used to engage in the unauthorized practice of law. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. The documents are under continual revision and are current only for the day they were received. It is strongly recommended that you verify on a regular basis that you have the most current documents.

TO ESTABLISH PATERNITY, LEGAL DECISION-MAKING, PARENTING TIME AND CHILD SUPPORT

This packet contains general information and instructions about filing a Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support. Be sure this packet contains the following documents:

Order	Title	# of Pages
1	Checklist: Use these forms if…	1
2	Table of Contents (this page)	1
3	Procedures: How to file Papers with the Court to Establish Paternity, Legal-Decision Making (Custody), Parenting Time and Child Support	7
4	"Summons"	2
5	"Order to Attend Parent Education Class"	2
6	"Child Support Calculator for Parents Worksheet to Determine Child Support Amount"	1
7	"Parenting Plan"	9
8	"Affidavit Regarding Minor Children"	3
9	"Sensitive Data Sheet" **(*NO COPIES REQUIRED)**	1
10	"Family Court Coversheet" **(*NO COPIES REQUIRED)**	2
11	"Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support	5
12	"Order for Paternity, Legal Decision-Making, Parenting Time and Child Support"	6

***NO COPIES REQUIRED. File original only. Do not serve on other party.**

You have permission to use these documents for any lawful purpose. These forms shall not be used to engage in the unauthorized practice of law. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. The documents are under continual revision and are current only for the day they were received. It is strongly recommended that you verify on a regular basis that you have the most current documents.

PROCEDURES

How to File Papers with the Court to Establish Paternity, Legal Decision-Making (Custody), Parenting Time and Child Support

STEP 1: COMPLETE THE FORMS – *TYPE OR PRINT IN BLACK INK*

DO NOT LEAVE ANY QUESTIONS BLANK

- Please answer all questions.
- If a question does not apply to your case mark "n/a" next to the question. By marking "n/a" next to a question this informs the Judge or Court that a question was "not applicable" and did not apply to your case or situation.
- If there is a question where the information is not known to you, please indicate "unknown to me".

STEP 2: SIGN, DATE AND NOTARIZE DOCUMENTS

- Documents must be signed and dated in front of ANY Notary Public.
- Please make sure you have a US issued photo ID with you when having your documents notarized.

STEP 3: MAKE COPIES OF DOCUMENTS

- **AFTER** your documents have been signed, dated and/or notarized make (2) copies of the following documents:

  - ✓ **Summons**
  - ✓ **Order to Attend Parent Education Class**
  - ✓ **Parents Worksheet for Child Support**
  - ✓ **Parenting Plan**
  - ✓ **Affidavit Regarding Minor Children**
  - ✓ **Petition for Paternity, Legal Decision-Making, Parenting Time and Child Support**

- Separate your documents into (3) sets in the following Order:

  Set 1: ORIGINAL DOCUMENTS

  1. Summons
  2. Order to Attend Parent Education Class
  3. Parents Worksheet for Child Support
  4. Parenting Plan
  5. Affidavit Regarding Minor Children
  6. Sensitive Data Sheet
  7. Family Court Cover Sheet
  8. Petition for Paternity, Legal Decision-Making, Parenting Time and Child Support

Set 2: COPIES FOR YOU THE PETITIONER

1. Summons
2. Order to Attend Parent Education Class
3. Parents Worksheet for Child Support
4. Parenting Plan
5. Affidavit Regarding Minor Children
6. Petition for Paternity, Legal Decision-Making, Parenting Time and Child Support

SET 3: COPIES FOR OTHER PARTY (THE RESPONDENT)

1. Summons
2. Order to Attend Parent Education Class
3. Parents Worksheet for Child Support
4. Parenting Plan
5. Affidavit Regarding Minor Children
6. Petition for Paternity, Legal Decision-Making, Parenting Time and Child Support

STEP 4: FILING FEES

There is a filing fee to file the Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support and there may be other charges associated with this case. Please check online in our current Filing Fees section to determine your fee.

DEFERRAL OR WAIVER OF FILING FEES: If you cannot pay these fees, you may qualify for a deferral or waiver of fees. If you are seeking a deferral or waiver of fees, please have the Deferral or Waiver of Fees Application completed and submitted with your forms.

ONE of the following is required to be attached to the completed and notarized Application for Deferral or Waiver of Fees:

- A copy of your last two (2) paycheck stubs.
- A notarized statement of non-employment. Any persons you are living with at this time who is assisting you financially may sign a notarized document stating they are supporting you.
- If you receive Food Stamps, SSI, unemployment or any governmental assistance we will need a copy of your letter of assignment/award or verification of the amount of assistance you receive.

NOTE: At the time of filing your documents through a deferral, your fees are only deferred to a later date; **they are not waived**. Only the Judge can waive your fees.

STEP 5: FILE THE PAPERS WITH THE CLERK OF THE SUPERIOR COURT

FILING OFFICE LOCATIONS/FILING IN PERSON AND/OR BY MAIL

You may file your documents at any of the Clerk of the Superior Court Office locations:

Florence	971 Jason Lopez Circle Bldg. A Florence, AZ 85132 Open Mon-Fri 8:00 to 5:00
Casa Grande	820 E. Cottonwood Ln Bldg. B Casa Grande, AZ 85122 Open Mon-Fri 8:00 to 5:00 closing 12:00 to 1:00 for lunch *(Documents requiring a filing fee are not accepted after 4:30)*
Apache Junction	575 N. Idaho Rd Ste. 109 Apache Junction, AZ 85119 Open Mon-Fri 8:00 to 5:00 closing 12:00 to 1:00 for lunch *(Documents requiring a filing fee are not accepted after 4:30)*
Mammoth	118 Catalina Mammoth, AZ 85618 **(*Temporarily Closed)***

FILING IN PERSON

To submit the Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support the following must be handed to the Clerk at the Filing Counter:

- ✓ Original plus (2) Copies of:
  - Summons
  - Order to Attend Parent Education Class
  - Parents Worksheet for Child Support
  - Parenting Plan
  - Affidavit Regarding Minor Children
  - Sensitive Data Sheet *(original only)*
  - Family Court Cover Sheet *(original only)*
  - Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support

- ✓ Required Filing Fee (or) a completed Application for Deferral or Waiver of Filing Fees with **ONE** of the following attached to the Application:
  - A copy of your last two (2) paycheck stubs.
  - A notarized statement of non-employment. Any persons you are living with at this time who is assisting you financially may sign a notarized document stating they are supporting you.
  - If you receive Food Stamps, SSI, unemployment or any governmental assistance we will need a copy of your letter of assignment/award or verification of the amount of assistance you receive.

FILING BY MAIL

If you are filing by mail the following documents must be mailed to:

Clerk of the Superior Court
P.O. Box 2730
Florence, AZ 85132

To file the Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support by mail, please mail the following documents:

- ✓ Original plus (2) Copies of:
  - Petition to Establish Paternity, Legal Decision-Making, Parenting Time and Child Support
  - Family Court Cover Sheet *(original only)*
  - Sensitive Data Sheet *(original only)*
  - Affidavit Regarding Minor Children
  - Parenting Plan
  - Parents Worksheet for Child Support
  - Order to Attend Parent Education Class
  - Summons

- ✓ Required Filing Fee (or) a completed Application for Deferral or Waiver of Filing Fees with **ONE** of the following attached to the Application:
  - A copy of your last two (2) paycheck stubs.
  - A notarized statement of non-employment. Any persons you are living with at this time who is assisting you financially may sign a notarized document stating they are supporting you.
  - If you receive Food Stamps, SSI, unemployment or any governmental assistance we will need a copy of your letter of assignment/award or verification of the amount of assistance you receive.

- ✓ An appropriate sized self-addressed ***stamped*** envelope for the return of your processed copies.

STEP 6: SERVE THE RESPONDING PARTY

- Once you have filed your forms with the Court and have received conformed copies back from the Clerk's Office, you will need to serve the responding party with their conformed/stamped copies.
- Service means giving legal notice to the other party (or parties) that you have filed court papers. You must provide proof of service to the court.
- Listed below are the different methods of service:

ACCEPTANCE OF SERVICE: The other party must sign the *"Acceptance of Service"* form in front of a Notary Public and return it to you. The other party cannot sign the *"Acceptance of Service"* until after you have filed the court papers with the court. The other party's signature on the *"Acceptance of Service"* does not mean that he/she agrees with the court papers. It means that the other party admits receiving the papers, without being served in person by the sheriff or a process server.

SERVICE BY CERTIFIED MAIL: This method of service allows you to give notice by a special type of mail. You can send the court papers by giving the post office copies of the court papers in an envelope, postage prepaid, to be sent to the other party by any form of mail requiring a signed and returned receipt. This is often called *Certified Mail, Restricted Delivery* by the post office. This means that the other party must sign for the papers. The Post Office will then return to you a Green Return Receipt containing the other party's signature. The Green Return Receipt will then need to be attached to the completed *Affidavit of Service by Certified Mail*. The *Affidavit of Service by Certified Mail* form must be completed/filled out in full and signed in front of a Notary Public. You will then submit to the Court the original *Affidavit of Service by Certified Mail.*

SERVICE BY REGISTERED PROCESS SERVER: This method requires you to hire, and pay, a registered process server to serve the other party with court papers. A process server is a person who will give the papers to the other party at home, work, or other location. The registered process server will give the Court a Sworn Affidavit of Service and/or Certificate of Service stating that the person was served. This method of service costs more than service by acceptance and requires the process server to find the other party. Service is complete at the time the process server hands the other party the court papers. If you decide to use this method, and the other party lives outside of Arizona, you will need to find a registered process server in the state where the other party lives.

SERVICE BY SHERIFF: This method requires you to contact the Sheriff's Office in the county where the other party lives to arrange for a Sheriff's deputy to give the other party the court papers. This method requires you to pay a fee to the Sheriff's Office. The Sheriff's Office will give the Court a Sworn Affidavit of Service stating that the person was served.

For more detailed information and forms on service, please refer to our Service of Court Papers packet on our website.

STEP 7: WAITING PERIOD

Once you have served the court documents on the other party and filed the appropriate proof of service with the Clerk's office, you now have to give the other party time to review the documents before moving on to the next step.

TIMEFRAME FOR WAITING

- Service by Acceptance - 21 Days if located in Arizona, 31 Days if located out of State
- Service by Certified Mail - 21 Days if located in Arizona, 31 Days if located out of State
- Service by Registered Process Server - 21 Days if located in Arizona, 31 Days if located out of State
- Service by Sheriff - 21 Days if located in Arizona, 31 Days if located out of State
- Service by Publication - 61 Days from first day of publication if located in or out of Arizona

STEP 8: FINALIZING YOUR CASE

There are different ways a case may finalize in the Court. Here are three different scenario's to help determine your next step:

- If the Other Party (the Respondent) has been served and proof of service is filed with the Court and the Other Party (the Respondent) has not filed a response with the court within the allotted time frame (waiting period), you may apply for Default. Please go to our website to view and/or print the default packet. At the time you submit your Application and Affidavit for Default to the Court, the Clerk will provide to you a Decree Assistance Project Screening Checklist. The checklist will instruct you to contact the Family Services of the Conciliation Court. You will contact the Conciliation Court ten (10)

Court business days after the mailing of the Application and Affidavit for Default to the Responding party.

- If the Other Party (the Respondent) files a response with the court, your case will be scheduled for an Early Resolution Conference (Hearing). You will be contacted by the Conciliation Court with your hearing date. If you do not hear from the Conciliation Court within a few weeks of a response being filed, please contact them at: 520.866.7349. If you miss your hearing date you will be charged $166 for not showing.

- If both you (the Petitioner) and the Other Party (the Respondent) do not take any type of action within 120 days of filing the Petition; your case could be dismissed due to inactivity.

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

_____

Name of Respondent **HONORABLE:** _____

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

Amanda Stanford
Clerk of the Superior Court

By _____

Deputy Clerk

ARIZONA SUPERIOR COURT, PINAL COUNTY

ORDER TO PARENT EDUCATION CLASS

THIS IS AN OFFICIAL ORDER. IF YOU DISOBEY THIS ORDER, THE COURT MAY FIND YOU IN CONTEMPT.

CASE NUMBER DO

Pursuant to A.R.S. '25-352, **IT IS ORDERED** you must attend and complete a parent education course within the following time limits:

1. **Petitioner:** You must complete the course within 45 days from the filing of the petition.

2. **Respondent*:*** You must complete the course within 45 days of being served with or accepting service of the petition. The *Respondent* must complete the course whether or not a response to the action is filed.

3. **Paternity Proceeding:** If paternity has been established, you must complete the class as described above. If paternity has not been established, you are welcome to complete the class at your earliest convenience. However, you are not required to complete the class until paternity has been established by the court.

4. **Compliance:** A.R.S. '25-353. Failure to comply - if a party fails to complete the educational program as ordered pursuant to section 25-352, the court may deny relief in favor of that party, hold that party in contempt of court or impose any other sanction reasonable under the circumstances. The court will be notified if you fail to complete the class. ***Exceptions: If you have completed the class within less than 1 year or the court excuses a party's participation.***

5. **Class Fee:** Each party shall pay the $40.00 fee to, or obtain a valid fee deferral from, the Clerk of the Superior Court (see attached *Notice* for fee payment instructions).

6. **Disability:** If, due to a disability, you need special accommodations for your attendance such as auxiliary aids, or materials in alternative formats, please contact Family Services of the Conciliation Court as soon as you receive this notice.

7. **Information:** Additional information about Parent Education is available at www.pinalcountyaz.gov/FSCC.

8. **Registration:** You may register for the course online at **www.pinalcountyaz.gov/PE**, or by phone at 520-866-7349.

Karl C. Eppich

Honorable Karl C. Eppich,
Presiding Judge, Family Court

Date

PARENT EDUCATION CLASS NOTICE

You have been ordered to attend a Parent Education Class. The Parent Education Class is taught by counselors from Family Services of Conciliation Court. You are required to complete the entire class to receive a copy of the *Notice of Completion and Certificate* that will be filed with the court. If you fail to comply, the Court may deny relief, hold you in contempt of court, or impose any other sanction reasonable under the circumstances. **(A.R.S. 25-352)**

The court will be notified if you fail to attend the class.

THIS IS A 3 STEP PROCESS.

1. **PAY** FOR THE CLASS WITH CLERK OF SUPERIOR COURT
2. **REGISTER** FOR THE CLASS WITH FAMILY SERVICES OF CONCILIATION COURT
3. **ATTEND** the 4 HOUR CLASS IN FLORENCE WITH PROOF OF PAYMENT

1. Use one of the following methods to pay for the Class: The cost is $40.00 per person.

- **ONLINE:** Make payment to via website**:** https://client.pointandpay.net/recurring/PinalCountySuperiorCourtAZ

- **PHONE:** Call 800.487.4567.

- **MAIL:** Mail personal checks, cashier's check or money order for $40.00 payable to Clerk of the Superior Court at the following address:

  Clerk of the Superior Court
  Parent Education Course
  P.O. Box 2730
  Florence, AZ 85132-2730

  Write your court case number and "***Parent Education Class"*** on the cashier's check, money order or personal check. IMPORTANT: You MUST enclose a self-addressed stamped envelope so the clerk's office will mail your receipt to you.

- **IN PERSON:** Payments can be made by cash, money order, MasterCard, Visa, Discover and American Express with valid ID of card holder at any of our office locations listed below.

  Clerk of the Superior Court Offices:
  Florence - 971 Jason Lopez Cir., Building A, Tel: 520.866.5300
  Apache Junction - 575 N. Idaho, Ste. 109 Tel: 520.866.5300
  Casa Grande - 820 E. Cottonwood Ln., # B Tel: 520.866.5300
  For information about obtaining a *fee deferral*, contact any clerk's office.

2. Register for the Class with Family Services of Conciliation Court: Sign up online at **www.pinalcountyaz.gov/PE,** or by phone at 520-866-7349.

3. Attend the Class: Bring **photo I.D. and proof of payment** or fee deferral to the class. Please arrive 15 minutes early.

Justice Complex (Highway 79)
Pinal County Superior Courthouse
971 Jason Lopez Cir., Bldg. A
Florence, AZ 85132

****No children are allowed in class****

If you reside outside of Pinal County, you are still required to complete a parent education class (A.R.S. 25-352). Please visit the website for information: www.pinalcountyaz.gov/FSCC

CHILD SUPPORT CALCULATOR for
Parent's Worksheet to determine Child Support Amount

The Court Self Help website offers a Free Child Support Calculator and Fillable Forms.

¨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

You may also visit the Law Library at the Pinal County Superior Court House for access and further assistance.

Calculate Support for Parent's

Your computer must be connected to a printer. Begin by selecting which Child Support Calculator applies to you, 2005 or 2011, and then press the Tab button on your keyboard to move through the form, or click on each field with your mouse.

Enter the appropriate information in each blank field. Not every blank field needs to be completed in every case. If you are not sure whether you should complete a blank field, click on the question mark (?) next to the blank field. You will receive additional information in accordance with the Arizona Child Support Guidelines.

When you have completed the Entry Form, click the "Print Worksheet" button to receive an estimate of the amount of child support the non- custodial parent may have to pay to the custodial parent for the support of their child(ren).

After clicking on "Print Worksheet" the form will automatically be filled in with the information from the Entry Form. Print the form and bring it with you at the time of filing your initial paperwork.

The Court Self Help website also offers the following fillable forms required to set up Child Support, select the "Forms" tab to make your selection:

- Child Support Order
- Post Paternity Establishment of Child Support Order
- Paternity Judgment Child Support Order

To have the Child Support amount automatically deducted from payroll, either of the below forms must be submitted:

- Income Withholding Order – May be completed by either party
- Current Employer Information – To be completed by the non-custodial parent/obligor/payer only

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: DO _____

PARENTING PLAN FOR:

☐ **JOINT LEGAL DECISION-MAKING**

OR

☐ **SOLE LEGAL DECISION-MAKING**

- ☐ **TO PETITIONER**
- ☐ **TO RESPONDENT**

_____
Name of Respondent

HONORABLE: _____

GENERAL INFORMATION

A. MINOR CHILDREN This Plan concerns the following children common to the parents:

Name	Birth Date

B. LEGAL DECISION-MAKING: ***Select One.*** If you select sole legal decision-making, you have the option of also selecting restrictions on the parenting time of the other parent.

☐ **SOLE LEGAL DECISION-MAKING**
Sole legal decision-making should be granted to
☐ **Petitioner** or
☐ **Respondent**

☐ **JOINT LEGAL DECISION-MAKING**
☐ Both parents will make major **educational** decisions together.
☐ Optional: If the parents do not agree, ***select one***
☐ the final decision will be with Petitioner
☐ the final decision will be with Respondent
☐ the decision will be addressed as follows:

_____

_____

☐ Both parents will make major **religious** decisions together.
☐ Optional: If the parents do not agree, ***select one***
☐ the final decision will be with Petitioner
☐ the final decision will be with Respondent
☐ the decision will be addressed as follows:

_____

_____

☐ Both parents will make major **medical** decisions together.
☐ Optional: If the parents do not agree, ***select one***
☐ the final decision will be with Petitioner
☐ the final decision will be with Respondent
☐ the decision will be addressed as follows:

_____

_____

☐ Both parents will make major **personal care** decisions together.
☐ Optional: If the parents do not agree, ***select one***
☐ the final decision will be with Petitioner
☐ the final decision will be with Respondent
☐ the decision will be addressed as follows:

_____

_____

C. PARENTING TIME Write your detailed parenting plan below. Include specific times, locations, and details regarding transportation. You will have the opportunity to request supervised parenting time or no parenting time, later in this document.

1. Regular Parenting Time:

_____

_____

_____

_____

2. **Summer Months:**

3. **School Breaks Longer Than 4 Days:**

4. **Three Day Weekends:**(for example, Labor Day, Columbus Day, Martin Luther King, Jr. Day, Presidents' Day and Memorial Day)

☐ The parents agree that whichever of them has the child(ren) for the weekend occurring nearer in time to the holiday will spend time with the child(ren) for the holiday, OR

☐ **Explain your request:**

5. **Transportation:** Write your procedure for exchanges of the child(ren) including location and responsibility for transportation.

6. **Holiday, Birthday and Special Occasion Schedule** Use the table below or the blank space to write your schedule.

Event	**Even Years**		**Odd Years**	
New Year's Eve	☐Petitioner	☐Respondent	☐Petitioner	☐Respondent
New Year's Day	☐Petitioner	☐Respondent	☐Petitioner	☐Respondent
Easter	☐Petitioner	☐Respondent	☐Petitioner	☐Respondent
4th of July	☐Petitioner	☐Respondent	☐Petitioner	☐Respondent
Halloween	☐Petitioner	☐Respondent	☐Petitioner	☐Respondent

Veteran's Day	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Thanksgiving	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Christmas Eve	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Christmas Day	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Child(ren)'s Birthday	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Mother's Day	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Father's Day	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Petitioner's Birthday	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent
Respondent's Birthday	☐ Petitioner	☐ Respondent	☐ Petitioner	☐ Respondent

_____

_____

_____

_____

7. Telephone Contact with Children

☐ Each parent may have telephone contact with the child(ren) during the child(ren)'s normal waking hours, OR

☐ Explain your request:

_____

_____

8. Travel with Child(ren) *(all of the following are optional)*

☐ Each parent is entitled to _____ consecutive days of vacation time per year with the child(ren). Each parent will give the other parent ____ days notice prior to the vacation.

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

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

☐ **SUPERVISED PARENTING TIME**

Supervised parenting time is in the best interest of the minor child(ren) because:

_____

_____

_____

_____

Name of the agency or person who will supervise:

_____

☐ **NO PARENTING TIME BETWEEN CHILD(REN) AND**
☐ **PETITIONER**
OR
☐ **RESPONDENT**

No parenting time is in the best interest of the minor child(ren) because:

_____

_____

_____

_____

D. 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 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.

E. Other Arrangements

☐ Each parent will inform the other parent of any change of address and/or phone number in advance OR within _____ days of the change.

☐ Both parents will promptly inform the other parent of any emergency or other important event that involves the minor children.

☐ Both parents will consult and agree with the other parent regarding any extra activity that affects the minor children's access to the other parent.

☐ Each parent will consider the other parent as care-provider for the minor children before making other arrangements.

☐ Each parent will keep all communication regarding the minor child(ren) between the parents and will not use the minor child(ren) to convey information or to set up parenting time changes.

☐ Each parent will encourage love and respect between the minor child(ren) and the other parent and neither parent shall do anything that may hurt the other parent's relationship with the minor children.

☐ Both parents will 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.

☐ 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.

☐ 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.

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

Obtain Written Consent or Court Order Before Moving: Notice required by ARS 25-408 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 law. The court may impose a sanction that will affect the legal decision-making or parenting time only in accordance with the child's best interests.

Parental Access to Records and Information Pursuant to Arizona law, 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 child(ren)'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.

Notice: Do not deviate from Parenting 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 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.

SIGNATURE OF ONE OR BOTH PARENTS

Signature of Petitioner: _____ Date: _____

Signature of Respondent: _____ Date: _____

IF YOU ARE REQUESTING SOLE LEGAL DECISION MAKING, THE FORM IS COMPLETE. DO NOT SIGN SECTION F OR G.

F. 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 crime 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 13-3212.
(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.
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 Petitioner: _____ **Date:** _____

Signature of Respondent: _____ **Date:** _____

G. JOINT LEGAL DECISION-MAKING: If requested or agreed to by the parties, the following will apply, subject to approval by the Judge:

1. **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.* **Complete Section 3 below.**

2. **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. * **Complete Section 3 below.**

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

Explain why Joint Legal Decision-Making is still in the best interests of the children:

_____

_____

_____

_____

_____

_____

_____

_____

4. **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.

5. **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.

SIGNATURE OF PARENT(S) REQUESTING JOINT LEGAL DECISION-MAKING

Signature of Petitioner: _____ Date: _____

Signature of Respondent: _____ 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

_____
Name of Petitioner

CASE NUMBER: DO2

AFFIDAVIT REGARDING MINOR CHILDREN

_____
Name of Respondent

HONORABLE: _____

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: _____ Dates: From _____ To _____
Address: _____ Lived with _____
City, State: _____ 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 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 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 (or affirmed) before me this _____ day of _____, 20 _____
(Day) (Month) (Year)

by _____
(Name of Signer)

_____ _____
(Affix notary seal here) **Notary Public** (Notary's Signature)

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	☐ Male or ☐ Female	☐ Male or ☐ 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.**

Arizona Superior Court, Pinal County
Family Court Cover Sheet

CASE NUMBER **DO 2** _____ ATLAS NUMBER(S) _____	Judge _____

PETITIONER'S NAME AND ADDRESS	**RESPONDENT'S NAME AND ADDRESS**
Name: Address: City/State/Zip: Phone Number: Email Address: DOB:	Name: Address: City/State/Zip: Phone Number: Email Address: DOB:
PETITIONER'S ATTORNEY Name/State Bar #: Address: City/State/Zip: Phone Number:	**EMERGENCY ORDER SOUGHT** ☐ Order of Protection ☐ Temporary Order ☐ Other _____ (Specify)
Do you or the other party need an interpreter? ☐ Yes ☐ No If yes, what language: _____	FEES: ☐ PAID ☐ NOT PAID - REASON ☐ Political Subdivision/Government Agency ☐ Deferred ☐ Waived

ACTION REQUESTED: Check Only One Box

DISSOLUTION (Divorce)
- ☐ With Children
- ☐ Without Children

- ☐ Legal Separation
- ☐ Paternity/Maternity
- ☐ Annulment
- ☐ Legal Decision-Making
- ☐ Order of Protection
- ☐ Foreign Judgment
- ☐ Domesticated Decree
- ☐ Foreign Judgment for Legal Decision-Making
- ☐ Establish Support
- ☐ Habeas Corpus
- ☐ Visitation
- ☐ Emergency Order of Protection
- ☐ Other _____ (Specify)

I receive or have received public assistance which may include AFDC, TANF, or AHCCS for my child(ren) or me.

☐ Yes ☐ No

I have a case with the Division of Child Support Enforcement.

☐ Yes ☐ No

If yes, list the case number(s)

_____

Do you currently have ANY other Pinal County Superior Court cases?

☐ Yes ☐ No

If yes, list the case number(s)

_____

Have you ever had ANY other Pinal County Superior Court cases?

☐ Yes ☐ No

If yes, list the case number(s)

_____

PETITIONER'S DECLARATION OF INFORMATION FOR CONCILIATION COURT

The wife is pregnant: ☐ Yes ☐ No

The respondent is being served by publication: ☐ Yes ☐ No

Please enter the number of children under the age of 18 of either or both parties who are in Legal Decision-Making of either or both parties: _____

NAMES OF MINOR CHILDREN & DATE OF BIRTH:	**NAMES OF MINOR CHILDREN & DATE OF BIRTH:**

There is an agreement as to the parenting arrangements of the minor children: ☐ Yes ☐ No

To the best of my knowledge, all information is true and correct.

_____

Attorney / Pro Per Signature ***(If no attorney, your signature is required)***

NOTICE

Effective September 8, 1992 and pursuant to Superior Court (Pinal County), Administrative Order No. 92-15, the Superior Court requires that a "Cover Sheet", which categorizes the cause of action, accompany any new action filed with the Superior Court in Pinal County. **PLEASE DO NOT INCLUDE THIS FORM WITH CASES THAT HAVE ALREADY BEEN FILED.** This form can only be processed **at the time of filing** New Complaints and Petitions.

Revised 6/22/09

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

_____
Name of Respondent

CASE NUMBER: DO2 _____

PETITION FOR PATERNITY, CHILD LEGAL DECISION-MAKING, PARENTING TIME AND CHILD SUPPORT

HONORABLE: _____

GENERAL INFORMATION:

1. INFORMATION ABOUT ME, THE PETITIONER

Name: _____
Address: _____
County of Residence: _____
Date of Birth: _____
Occupation or Job Title: _____
My Relationship to Minor Children for whom I want the Paternity order:
- ☐ Mother
- ☐ I Claim to be the Father
- ☐ I am a Court-Appointed Guardian, Conservator or "Best Friend" for the Minor Child(ren) Born out of Wedlock

2. INFORMATION ABOUT THE RESPONDENT

Name: _____
Address: _____
County of Residence: _____
Date of Birth: _____
Occupation or Job Title: _____
The Other Party's Relationship to Minor Children for whom I want the Paternity Order:
- ☐ Mother
- ☐ Father

3. WHY I AM FILING THIS COURT CASE IN ARIZONA AGAINST THE RESPONDENT:
(Check one or more boxes that are true)

☐ The person is a resident of Arizona
☐ I believe that I will personally serve the person in Arizona (see packet on service to know about this.)
☐ The person agrees to have the case heard here and will file written papers in the court case;
☐ The person lived with the minor child in this state at some time;
☐ The person lived in this state and provided pre-birth expenses or support for the child;
☐ The minor child 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;
☐ The person signed a birth certificate 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 THE MINOR CHILDREN FOR WHOM I WANT PATERNITY ORDER:
NAMES:

	First	Middle	Last
(a)			
(b)			
(c)			

WHO WERE BORN ON THIS DATE AND AT THIS PLACE: (List in same order as above)

	Month/	City, State, Nation of Birth
(a)		
(b)		
(c)		

STATEMENTS ABOUT PATERNITY:

5. WHY YOU THINK THE PERSON IS THE FATHER OF THE MINOR CHILD(REN):
(Check which box applies)

☐ **AFFIDAVIT:** Petitioner and Respondent signed an Affidavit of Paternity acknowledging that ☐ Petitioner or ☐ Respondent is the minor child(ren)'s natural father. A copy is attached.

☐ **BIRTH CERTIFICATE:** ☐ Petitioner or ☐ Respondent is named as the natural father on each of the minor child(ren)'s birth certificate(s). Copy (or copies) attached.

☐ **BLOOD TEST:** DNA Testing indicates ☐ Petitioner or ☐ Respondent is the minor child(ren)'s natural father. Report(s) of test results attached.

☐ **PARTIES LIVING TOGETHER:** Petitioner and Respondent were not married to each other at any time during the ten months before birth of the minor child(ren). However, the parties lived together during the period(s) when the minor child(ren) could have been conceived.

☐ **SEXUAL INTERCOURSE:** Petitioner and Respondent were not living together but had sexual intercourse at the probable date(s) of conception of the minor child(ren). The mother of the minor children did not have sexual intercourse with anyone else during the periods in which the minor child(ren) could have been conceived.

☐ **OTHER**: (explain)

_____

_____

_____

6. **ABOUT MARRIAGE AND HUSBAND** (if applicable, check one box.)

☐ Mother was not married at the time minor child(ren) were born or conceived or at least 10 months before minor child(ren) were born or conceived, **OR**

☐ Mother was married when minor child(ren) were born or conceived or at least 10 months before minor child(ren) were born or conceived, but husband is not father of minor child(ren). Husband is a party to this court case because of marriage.

7. **LEGAL DECISION-MAKING OF THE MINOR CHILDREN.**
(If Applicable. Court must make findings in contested Legal Decision-Making cases.)

☐ Sole Legal Decision-Making to ☐ Petitioner or ☐ Respondent **OR**

☐ Joint Legal Decision-Making is in the best interests of the minor children for the following reasons:

_____

_____

_____

OTHER STATEMENTS TO THE COURT:

8. **MEDICAL EXPENSES:** ☐ **THERE ARE** or ☐ **THERE ARE NO** unreimbursed medical expenses incurred by the mother, resulting from the birth of the minor child(ren). If there are, these costs and expenses should be awarded to ☐ Petitioner or ☐ Respondent according to law.

9. **OTHER EXPENSES:** The parties should be ordered to divide between them any uninsured medical, dental, or health expenses, reasonably incurred for the minor child(ren), in proportion to their respective incomes.

10. **DOMESTIC VIOLENCE:** (Check here if you are asking for joint Legal Decision-Making.)

☐ Domestic Violence has not occurred between the parties. **OR**

☐ Domestic Violence has occurred but it has not been significant. Explain why joint Legal Decision-Making is still in the best interest of the minor child(ren) even though domestic violence has occurred.

11. **VENUE:** (Check here if the following statement is true):

☐ 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).

12. **DRUG CONVICTION WITHIN LAST TWELVE MONTHS:** (Check one box.)

☐ I have not been convicted for a drug offense or driving under the influence of drugs or alcohol in the last twelve (12) months. **OR**

☐ I have been convicted for a drug offense or driving under the influence of drugs or alcohol in the last twelve (12) months. However, the parenting time arrangement I am requesting appropriately protects the minor child(ren). Explain how this arrangement appropriately protects the minor children.

REQUESTS I MAKE TO THE COURT:

A. PATERNITY: Order that (legal name of the father, as on *his* birth certificate)

First Middle Last

_____

be declared the natural father of the minor child(ren).

B. BIRTH CERTIFICATE:

Order that the name of the father _____ be added to each minor child's birth certificate;
(name)

C. LAST NAME: (check the box and fill in the blank if you want this):

☐ Order that each minor child's last name be changed to the last name of :_____

D. LEGAL DECISION-MAKING OF MINOR CHILDREN: (check and complete 1 or 2):

1. SOLE LEGAL DECISION-MAKING: ☐ Sole Legal Decision-Making of the minor child(ren) awarded to ☐ Petitioner or ☐ Respondent, subject to Parenting Time as follows:

A. ☐ Reasonable parenting time rights to the parent not having Legal Decision-Making, as will be described in a Parenting Plan attached to the Final Order. **OR**

B. ☐ Supervised parenting time between the minor children and ☐ Petitioner or ☐ Respondent, or no parenting time by the ☐ Petitioner or ☐ Respondent is in the best interests of the minor child(ren) for the following reasons: (explain here reasons for supervision or no parenting time):

i.☐ Supervised parenting time to the parent not having Legal Decision-Making, only in the presence of another person, who is named by the court below upon a finding that supervised access is in the best interest of the minor child(ren),

1. Person to supervise:
2. Requested restrictions on parenting time: (explain here)

_____

_____

3. The cost of supervised parenting time shall be paid by ☐ the parent being supervised; ☐ the parent having Legal Decision-Making; ☐ shared equally by the parties.

OR

ii.☐ No parenting time rights to the parent not having Legal Decision-Making.

OR

2. JOINT LEGAL DECISION-MAKING: ☐ Petitioner and Respondent agree to act as joint custodians of the minor children, as set forth in the Parenting Plan by the parties, signed by both parties, if the Court adopts the agreed terms of the joint Legal Decision-Making agreement setting forth the Legal Decision-Making and parenting time agreement between the parties. There have been no significant acts of domestic violence by either parent.

E. CHILD SUPPORT: Order that child support shall be paid by (check one box) ☐ Petitioner or ☐ Respondent in a reasonable amount as determined by the Court under the Arizona Child Support Guidelines. Support payments shall begin on the first day of the first month following the entry of the Paternity Decree/Order. These payments, and a fee for handling, shall be paid through the Support Payment Clearinghouse and collected by automatic wage assignment. Further, that costs for past child support and care for child(ren) in the amount of $_____shall be paid by ☐ Petitioner or ☐ Respondent in the amount of $_____ each month until paid in full. Payments shall be made as stated above.

F. **EXPENSES OF MOTHER:** Order that ☐ Petitioner or ☐ Respondent pay a reasonable amount to cover unreimbursed expenses incurred by the mother related to the birth of each child(ren).

G. **HEALTH, MEDICAL, DENTAL AND VISION CARE INSURANCE AND HEALTH CARE EXPENSES FOR CHILDREN UNDER THE AGE OF 18:** Order that ☐ Petitioner shall pay for ☐ medical ☐ dental insurance ☐ vision care coverage **AND /OR** ☐ Respondent shall pay for ☐ medical ☐ dental insurance ☐ vision care coverage, AND Order that Petitioner and Respondent pay for all reasonable unreimbursed medical, dental, vision care, and health-related expenses incurred for the minor child(ren) in proportion to their respective incomes as described on the Parents' Worksheet, which shall be submitted with the Judgment and Order.

H. **TESTING and COSTS:** Order that if paternity is contested, Petitioner and Respondent be ordered to submit to such blood and tissue tests as may be necessary by this Court to establish paternity, and that Respondent must pay all costs and expenses of this lawsuit, if he/she contests these proceedings, including the costs of the blood tests or other genetic testing; filing each child's birth certificate; attorneys' fees and court costs;

I. **OTHER ORDERS I AM REQUESTING** (explain request here):

_____

_____

_____

_____

OATH OR AFFIRMATION AND VERIFICATION

I state to the Court under penalty of law that the information I have provided is 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**

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: _____

JUDGMENT AND ORDER FOR PATERNITY AND/OR

☐ **Legal Decision-Making**
☐ **Child Support**
☐ **Parenting Time**
☐ **Vital Records** (Check this box if any minor child was born in Arizona and the father's name is to be added and/or the minor child's last name is to be changed on the birth certificate.)

_____
Name of Respondent

HONORABLE: _____

1. This case has come before the Court for a final Order. If necessary, the Court has taken any 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 paternity, legal decision-making, support, parenting time, and expenses related to birth of the minor child(ren).

4. Petitioner and Respondent are the natural parents of the minor child(ren) named on birth certificates as:
NAME:

	First	Middle	Last
(a)			
(b)			
(c)			

WHO WERE BORN ON THIS DATE AND AT THIS PLACE: (list in same order as above)

	Month/	City, State, Nation of Birth
(a)		
(b)		
(c)		

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 decree 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 decree 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.)

The court finds that the person responsible for paying child support has the ability to pay child support:
☐ In the amount entered on Line 33 of the Worksheet for
$ _____
☐ In an adjusted amount calculated using the self-support reserve on line 35 of the Worksheet for
$ _____

8. **LEGAL DECISION-MAKING OF THE MINOR CHILD(REN).** (Check and complete only if Legal Decision-Making contested or joint Legal Decision-Making ordered.)
☐The Legal Decision-Making order or agreement is in the best interests of the minor child(ren) for the following reasons:

9. **SUPERVISED OR NO PARENTING TIME.** (Check and complete only if supervised or no parenting time is ordered.)
☐ Supervised parenting time between the minor child(ren) and
☐ Petitioner **OR** ☐ Respondent,
☐ **NO** parenting time by ☐ Petitioner **OR** ☐ Respondent, is in the best interests of the minor child(ren), for the following reasons: (Explain the reasons)

_____

_____

_____

_____

10. **DOMESTIC VIOLENCE.** If the court enters an order for joint Legal Decision-Making of the minor child(ren) check box "1" or box "2" and explain.
    1. ☐ Domestic violence has not occurred during this relationship, **OR**
    2. ☐ Domestic violence has occurred, but the domestic violence has not been significant. Explain why joint Legal Decision-Making is in the best interest of the minor child(ren) even though domestic violence has occurred:

    _____

    _____

11. **DRUG CONVICTION WITHIN LAST TWELVE MONTHS.** (Check, if applicable).
☐ 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 minor child(ren).

THE COURT ORDERS:

1. **PATERNITY:** (Name of father as on his birth certificate)

First	Middle	Last

is declared to be the natural father of the minor child(ren).

FOR ANY CHILDREN BORN IN THE STATE OF THE ARIZONA, THE CLERK OF COURT SHALL FORWARD A COPY OF THIS ORDER TO THE OFFICE OF VITAL RECORDS, WHICH IS ORDERED TO AMEND THE BIRTH CERTIFICATE(S) AS FOLLOWS:

2. ☐**The father's name shall be entered on the minor child(ren)'s birth certificate.**

3. ☐**The minor child/children's last name shall be changed to:** _____

4. **LEGAL DECISION-MAKING AND PARENTING TIME:**
    1. **SOLE LEGAL DECISION-MAKING:**

☐ Sole Legal Decision-Making of the minor child(ren) is awarded to:
☐ **PETITIONER** or ☐ **RESPONDENT**, subject to parenting time as follows:
(A) ☐ 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**,
(B) ☐ Supervised parenting time, but only in the presence of another person, who is named below or otherwise approved by the Court.

Name of supervisor: _____

Restrictions on parenting time: _____

_____

_____

The cost of supervised parenting time shall be paid by:

☐ Petitioner or Respondent or shared equally by the parties.

OR

☐ No parenting time rights to ☐ Petitioner or ☐ Respondent. (see next page)

OR

2. JOINT LEGAL DECISION-MAKING:

☐ Petitioner and Respondent agree to act as joint custodians of the minor child(ren), as set forth in the Parenting Plan signed by both parties and attached to and made a part of this Order. There have been no significant acts of Domestic Violence by either parent. The Court adopts the agreed terms of the Parenting Plan that describes the Legal Decision-Making and parenting time and/or support agreement between the parties. By attaching the Parenting Plan to the Order, the Parenting Plan becomes part of the final Order and carries the same legal weight as any other Order.

5. CHILD SUPPORT:

☐ **PETITIONER** or ☐ **RESPONDENT** 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 Decree, according to the Child Support Worksheet. All child support payments shall be made through the Support Payment Clearinghouse, 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.

Costs for past child support and care for minor child(ren) in the amount of $_____shall be paid by

☐ **PETITIONER** or ☐ **RESPONDENT** in the amount of $ _____ each month until paid in full. Payments shall be made as stated above.

6. MEDICAL/DENTAL/VISION CARE INSURANCE EXPENSES FOR CHILDREN

☐**PETITIONER** is ordered to provide ☐medical, dental ☐vision care insurance.

☐**RESPONDENT** is ordered to provide ☐ medical, ☐ dental ☐vision care insurance.

The party ordered to pay for medical/dental/vision care 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.

☐ **PETITIONER** is ordered to pay _____% and/or

☐ **RESPONDENT** is ordered to pay _____% of all reasonable uncovered and/or uninsured medical, dental, vision care, prescription, and other health care expenses for the minor child(ren), including co-payments.

Costs for past medical expenses for minor child(ren) in the amount of $_____ shall be paid by

☐ **PETITIONER** or ☐ **RESPONDENT** in the amount of $_____ each month until paid in full. Payments shall be made as stated above.

7. OTHER COSTS: ☐ **PETITIONER** or ☐ **RESPONDENT** is awarded judgment in the amount of $_____ for expenses incurred relating to medical care, hospitalization and other costs related to the birth of the minor child(ren), which shall be paid by

☐ **PETITIONER** or ☐ **RESPONDENT**.

8. 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.

9. **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 the birth of the child(ren). The court reserves jurisdiction to enter further orders at such time as the Court acquires personal jurisdiction over the Respondent.

10. **OTHER ORDERS:** This Court makes further Orders relating to this matter as follows:

_____

_____

_____

DONE IN OPEN COURT: _____ _____

(Judge of the Superior Court)

ACKNOWLEDGEMENT OF THE PARTIES OR THEIR ATTORNEYS

APPROVED BY:

_____ _____

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**

If you are filing a Consent Decree for Judgment and Order for Paternity and/or Child Support, Legal Decision-Making, Parenting Time and Vital Records or if there has been a trial, the Respondent must sign:

_____ _____
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**

If either party is represented by a lawyer, the lawyer must sign:

Petitioner's Lawyer: _____ Date: _____

Respondent's Lawyer: _____ Date: _____