Revised 05.19.16

LEGAL SEPARATION WITH MINOR CHILDREN

(For Petitioner Only)

(When Parties <u>AGREE</u> to all terms of the Separation)

PINAL COUNTY

NON-CONVENANT MARRIAGE

TO FILE FOR LEGAL SEPARATION WITH CHILDREN

<u>STEP 1</u>

(Please complete step one before proceeding to the next step)

INSTRUCTIONS AND FORMS

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

LEGAL SEPARATION WITH MINOR CHILDREN

This packet contains general information and instructions about filing a legal separation petition and other court papers when there are minor children. Be sure this packet contains the following documents:

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***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.

REPRESENTING YOURSELF IN FAMILY COURT

This brief guide provides some very basic information to help you understand the proceedings. It does not tell you everything about family law or family court, and it is no substitute for understanding Title 25 of the Arizona Revised Statutes, the Arizona Rules of Family Law Procedure, and the Arizona Rules of Evidence. For more information, you should go to the Pinal County Superior Court website (www.pinalcountyaz.gov/Departments/JudicialBranch/) or consult a lawyer.

Proceedings In Family Court

Proceedings in Family Court follow the ***Arizona Rules of Family Law Procedure***.

In a divorce or paternity case, you may be referred to an Early Resolution Conference, Mediation, a Parenting Conference, or a Settlement Conference (sometimes called an Alternative Dispute Resolution or "ADR"). These proceedings are designed to help the parties reach agreement on all or some of their disputes. They generally are not conducted by your assigned Judge.

You may also have to appear before the Judge for a pretrial hearing. The most common pretrial hearings are (1) a ***Resolution Management Conference***, which helps the Judge manage the case by, among other things, setting deadlines and a trial date; and (2) a ***Temporary Orders Hearing***, at which the Judge may issue temporary orders to govern the case until the trial.

If you do not reach a settlement of all issues, there will be a ***trial***. This is the single hearing where the Judge will hear your evidence and make final decisions on disputed issues.

Disclosure And Discovery

To help parties prepare for the trial, the Arizona Rules of Family Law Procedure have ***disclosure*** and ***discovery*** requirements.

Disclosure requirements are in Rule 49. Each party must voluntarily provide certain information to the other party. You have an obligation to disclose such information to the other party, and you have a right to insist that the other party disclose such information to you. Failure to disclose as required may result in sanctions, including being barred from offering evidence that was not timely disclosed.

If you need information that is not voluntarily disclosed, you may engage in ***discovery***, such as requesting documents from a party or subpoenaing documents from non-parties. Rules 51 through 65 of the Arizona Rules of Family Court discuss the requirements for discovery.

What Is A Trial?

A trial is the time for you and for the other party to present ***evidence*** on disputed issues.

General Issues If Children Are Involved In Your Case:

- Legal custody (decision-making authority over major matters concerning the children).
- Parenting time (what time each parent will spend with the children).
- Child support.

Additional Issues If Your Case Involves A Divorce:

- Spousal maintenance.
- Division of community property and allocation of debts.

The Judge will decide these issues based on the evidence presented during the trial. ***Only evidence you bring to the trial will be considered***.

After the trial, the Judge may issue a ruling in open court or may take the case "under advisement," which means that the Judge will issue a written ruling at a later time.

The judge's ruling may be a signed ***decree*** or ***judgment***, which officially concludes the case. If the judge chooses, the judge may decide disputed issues and then require one or both of the parties to submit a decree for the judge's signature.

Preparing For The Trial

When preparing for the trial, it is critical that you read the judge's minute entries carefully. The minute entries typically contain the Judge's requirements for the trial. These requirements may include: (1) Submitting a ***pretrial statement*** that describes the issues in the case and lists your witnesses and exhibits; and (2) Giving copies of your ***exhibits*** to the Clerk and to the other party before the trial.

Many Judges impose ***time limits*** at the trial. It is your responsibility to make sure you present all your evidence in the time allotted.

What Happens During The Trial?

The main thing that happens during the trial is the presentation of ***evidence***. The Judge will make decision based on the evidence presented during the trial. Evidence is generally of two kinds: (1) Witness testimony and (2) Documents.

When you call a ***witness*** to testify, you must ask the witness questions. A witness may only answer questions that are asked. When the party who called a witness is done with questioning, the other party may "cross-examine" the witness by asking additional questions.

A party may testify as a witness on his or her own behalf. However, while a witness is on the stand, the parties may only ask questions. Arguing with a witness or commenting on the answers is not allowed.

Documents may be evidence at the trial, but you must follow the proper procedure. Before the trial (usually 5 days before), you must give documents that you want to use to the Clerk of the Court to be "marked" with an exhibit number. However, marking an exhibit does not mean it is evidence. Rather, during the trial, you must "offer" the exhibit by asking the judge to admit it into evidence. The judge then decides whether to admit the evidence. The judge will consider only evidence that is ***admitted***.

Proper Court Behavior

Although family cases are often emotional, it is important that everyone act in an orderly and respectful way in court. Here are some "Do's and Don'ts:"

- Do dress appropriately. Don't wear hats, sunglasses, tank tops, shorts, or flip-flops.
- Do wait your turn to speak. Don't interrupt while someone else is talking.
- Do treat others with respect. Don't curse, make faces, or engage in confrontational behavior.
- Do be honest and candid with the judge.
- Do make sure that friends and family who accompany you sit quietly. They are not allowed to speak unless called as a witness, and then only when they are testifying.

For Additional Information

This guide presents very basic information. For additional information, read the applicable statutes and rules, visit the Pinal County Superior Court website (www.pinalcountyaz.gov/Departments/Judicial Branch) and if necessary, consult a lawyer.

PETITION AND PAPERS FOR
"*LEGAL SEPARATION WITH CHILDREN*"

CHECKLIST

USE THE FORMS AND INSTRUCTIONS in this packet only if the following factors apply to your situation:

- ✓ You want to file a petition for legal separation. **Warning: If the other party does not want a Legal Separation, the Court will not enter a Legal Separation,**

AND

- ✓ You are **not** ready to file for divorce.

AND

- ✓ You and your spouse have children with each other OR the wife is pregnant by the husband or **will** be pregnant by the husband before the Legal Separation is over, (if you have no children together, see the Legal Separation without Children packet)

AND

- ✓ Either you or your spouse live in Arizona, or one of you is a member of the armed forces and is stationed in Arizona,

AND

- ✓ Either you or both of you desire to live separate and apart or you believe that the marriage is irretrievably broken (you and your spouse cannot make the marriage work),

AND

- ✓ You or your spouse has tried to resolve your problems through Conciliation Court, or there is no point in trying to resolve your problems because the marriage is irretrievably broken.

READ ME: It is very important for you to know that when you sign a court document, you may be helping or hurting your court case. Before you sign any court document, or get involved with a court case, it is important that you see a lawyer to make sure you are doing the right thing.

INSTRUCTIONS

How to Fill Out *"Petition for Legal Separation with Children"*

DOMESTIC VIOLENCE: Domestic violence can be part of any marriage. Domestic violence includes physical violence such as hitting, slapping, pushing or kicking **or** threats of physical violence directed against you and/or your children **and/or** verbal abuse used to control you and/or your children.

Court documents request your address and phone number. If you are a victim of domestic violence, and you do **not** want your address to be known to protect yourself or your children from further violence, you **must file** a ***"Petition for an Order of Protection"*** and ask that your address **not** be disclosed on court papers. With that Order, you do not need to put your address and phone number on your legal separation papers. Just write "protected" in the space on the form where you are asked for this information. You must tell the Clerk of the Court your address and phone number as soon as possible so the court can get in touch with you. The court will keep your address protected.

(ALL FORMS: TYPE OR PRINT IN BLACK INK)

FAMILY COURT COVER SHEET

- **The Family Court Cover Sheet is REQUIRED to be completed and filed in Pinal County.**
- **Write in the information requested about the petitioner, respondent and any children under the age of 18.**
- **DO NOT INCLUDE MAILING ADDRESS ON THIS FORM IF REQUESTING ADDRESS PROTECTION.**
- **Case Type: Mark only one box that matches the legal procedure for which you are filing the documents in this packet: [x] Legal Separation.**
- **Interpreter: Check "yes" or "no" to indicate whether an interpreter is needed. If "yes," write in what language(s).**
- **No additional copies needed. Do NOT serve this document on the other party.**

SENSITIVE DATA SHEET

- **Write in the information requested about petitioner, respondent, and any children under the age of 18.**
- **DO NOT INCLUDE MAILING ADDRESS ON THIS FORM IF REQUESTING ADDRESS PROTECTION.**
- **No additional copies needed. Do NOT serve this document on the other party.**

SUMMONS AND PRELIMINARY INJUNCTION: Fill in the following information: Your name; street address **(if not protected**); city, state and zip code; telephone number; ATLAS number; name of Petitioner (your name); name of Respondent (your spouse's name). You will have an ATLAS number ONLY if you receive or have received AFDC or other public benefits for your minor child(ren) that are common to you and your spouse. If you are represented by an attorney, write in the attorney's bar number. Tell the court whether you represent yourself or are represented by an attorney. DO NOT fill out the rest of the form except on Page 2 of the Preliminary Injunction; fill out the description of other party. The Clerk of Court will complete it later.

PETITION FOR LEGAL SEPARATION WITH CHILDREN:

A. Use this form **ONLY** if you are getting a legal separation and there are children under the age of 18 years involved who are common to you and your spouse, and you have a non-covenant marriage. Arizona laws regarding "covenant" marriages went into effect August 21, 1998. See ARS §25-901. If you have a covenant marriage, you and your spouse were asked to sign an affidavit that included a statement similar to this: "We solemnly declare that marriage is a covenant between a man and a woman who agree to live together as husband and wife for as long as they both live. We have chosen each other carefully. We understand that a covenant marriage is for life. If we experience

marital difficulties, we commit ourselves to take all reasonable efforts to preserve our marriage, including marital counseling. We declare that our marriage will be bound by Arizona law regarding covenant marriages and we promise to love, honor and care for one another as husband and wife for the rest of our lives." (This paperwork will **not** work if you have a covenant marriage. If you have questions about whether you have a "covenant" marriage, look at your marriage license and/or see a lawyer for help). Make sure your form is titled ***"Petition for Legal Separation with Children."***

B. In the top left corner of the first page, fill out the following: your name (if you are the person filling out the petition and filing the petition with the court); your address **(if not protected)**; your city, state and zip code; your telephone number; and the attorney bar number if you are represented by an attorney. Then check the box to say whether you are represented or not.

C. Fill in **your** name in the space that says "Name of Petitioner." Remember, you will be the PETITIONER through the whole case. (This includes any emergency petitions, temporary petitions, and post-legal separation decree petitions.) In the space that says "Name of Respondent," fill in the name of your spouse. Your spouse will be the RESPONDENT for the rest of this case. (This includes any emergency petitions, temporary petitions, and post-legal separation decree petitions.)

D. Leave the line for "DO" Case Number blank. When you file your papers, you will receive a case number.

STATEMENTS MADE TO THE COURT, UNDER OATH:

1. **INFORMATION ABOUT ME, THE PETITIONER.** Fill in your name, address (**if not protected**), date of birth, occupation and length of time in Arizona.

2. **INFORMATION ABOUT MY SPOUSE, THE RESPONDENT.** Fill in your spouse's name, address, (if you know it) date of birth, occupation and length of time in Arizona.

3. **INFORMATION ABOUT MY MARRIAGE.** Fill in the date that you were married, along with the city and state. If you do not know this information, and you were married in Pinal County, you may get a copy of your marriage license from the Clerk of the Superior in Florence. If you were married in another county, go to the Clerk of the Superior Court at the county seat in the county where you were married. Then check the box to tell the court you do not have a "covenant" marriage. If you have a "covenant marriage," see a lawyer for help. If you do not know whether you have a covenant marriage or not, review your marriage license and/or see a lawyer for help.

4. **90-DAY REQUIREMENT.** This tells the court that you **or** your spouse have lived in Arizona, **or** been stationed in Arizona while in the Armed Forces, for at least 90 (ninety) days prior to the day you filed the ***"Petition for Legal Separation with Children."*** Before you file for Legal Separation, this **MUST** be true. **IF IT IS NOT TRUE, YOU CANNOT FILE FOR LEGAL SEPARATION** in Arizona until it becomes true.

5. **DOMESTIC VIOLENCE.** This tells the court if domestic violence was in the marriage, which affects a request for joint legal decision-making, (if you intend to ask for joint legal decision-making). If you are not sure what domestic violence means, see the "Domestic Violence" section on the first page of these instructions. Check the box that applies to your situation.

6. **CHILDREN COMMON TO THE PARTIES WHO ARE LESS THAN 18 YEARS OF AGE.** If there are no children under the age of 18 born to, or adopted by you and your spouse, you should use the ***"Petition for Legal Separation without Children"*** Packet. Otherwise, check the second box and provide the name, birth date and current home address including city, state, and zip code for each child born to, or adopted by you and your spouse.

7. **PREGNANCY.** If the wife is **NOT** pregnant at this time, check the first box and go on. If the wife **is** pregnant, check the second box. Fill out the date the baby is due, and fill in any information regarding the parents of the unborn child.

INFORMATION ABOUT PROPERTY AND DEBT:

The information you give in paragraphs 8a through 9b tells the court about your property and debts, and how you think your property and debts should be divided. Community property is generally any property you and your spouse purchased during your marriage or paid for during the marriage, no matter who uses the property or who paid the money. Unless property was a gift or inheritance, all property acquired during the marriage up until the time when the Respondent is served with the Petition for Legal Separation is generally community property, and both you and your spouse are entitled to roughly an equal share of this property. Community debts or bills are generally any debt you and your spouse acquired during your marriage up until the time the Respondent is served with the Petition for Legal Separation, no matter who spent the money. If you have questions, or have a lot of community property or debt, you should speak with an attorney **BEFORE** filing your Petition and other papers.

8.A. COMMUNITY PROPERTY. PROPERTY ACQUIRED DURING THE MARRIAGE: If you and your spouse do not have any property from the marriage, check the first box. If you and your spouse have property together, check the second box. If you checked the second box, you must tell the court what property should go to you and what property should go to your spouse. Generally, the court will divide the property 50-50, as of the time the Respondent was served with the Petition for Legal Separation, unless there are good reasons not to. It is unlikely that the court will give most or all of the property to either spouse, so put some thought into what you think would be a fair division before answering this question. Usually, if you and your spouse cannot decide which spouse should receive what property, the court will order that the property be sold and any money received divided between you and your spouse.

First, list the property that you want the court to award to you, the Petitioner, and list the property that you want the court to award to your spouse, the Respondent. Put a check in the box that matches the property you want to go to which person. **You should describe the property thoroughly for identification purposes and state its value when asked**. Use the brand name, model and serial numbers, where applicable.

TYPES OF PROPERTY:

a. Real Property (property (land) or home). Check who you want to get the property. You can ask the court to give you the home, to give the home to your spouse, or to sell the home and divide the proceeds. You should write the complete address of the property under "Real estate located at" Most property has a legal description such as "LOT 77, PINE TREE ACRES, according to Book 111 of Maps," which appears on your deed papers. You should use this description. A cemetery plot is considered real property.

b. Household furniture. This includes sofas, beds, tables, and so forth. Be specific.

c. Household furnishings. This includes things in the house other than furniture, for example: dishes, small appliances, rugs, and so forth. Be specific.

d. Other. List things that you want or you want your spouse to have that has not already been listed.

e. Pension/retirement fund/profit sharing/stock plans/401K. You and your spouse each generally have an interest of up to 50% (one-half) of the other spouse's plan, based upon the length of your marriage. The longer the marriage, the greater your financial interest in your spouse's plan (up to 50 percent of the benefits/plan if you have been married the whole time the plan has existed.) Check this box if you want to divide your interest in a retirement or profit sharing/retirement/401K plan.

If you check this box, you must see an attorney about a **document that requires professional assistance to prepare.** The Self-Service Center and the court **do not** have Qualified Domestic Relations Order forms.

f. **Motor vehicles.** List the Vehicle Identification Number (VIN), the year and make of the car (Ford, Honda) and the model (Mustang, Lumina).

8.b. **SEPARATE PROPERTY: PROPERTY ACQUIRED BEFORE MARRIAGE.** If **you did not** have or bring any property into the marriage, check the first box. If **your spouse did not** have or bring any property into the marriage, check the next box. If you or your spouse brought property into the marriage or acquired property after the Respondent was served with the Petition for Legal Separation, check the third and/or fourth box. If you checked the third and/or fourth box, you must tell the court what property you brought into the marriage and what property your spouse brought into the marriage. List the property that you want the court to award to you, the Petitioner and list the property that you want the court to award to your spouse, the Respondent. Put a check in the box that matches the property you want to go to which person. You should describe the property thoroughly for identification purposes. You can use the brand name and model and serial numbers where applicable.

9.a **COMMUNITY DEBTS: DEBTS INCURRED DURING THE MARRIAGE.** If you and your spouse **do not** owe money on any debts from the marriage, check the first box and go on. If you and your spouse owe money on any debts from the marriage, check the second box. If you check the second box, tell the court which debts you should pay and which debts your spouse should pay. Generally, the court will attempt to make a fair division of the debts. If you get property that has debt on it, you will probably also be given the debt. Ordering one person to pay all the debt is unusual. Think about what is a fair division of the debts before answering this question. Provide enough information to accurately identify each debt.

If you and your spouse have been separated and have acquired new debts on your own since the separation and before filing for legal separation, you may want the court to order that each of you pay for any new debt after the date you separated. You can make this request on page 6 of your Petition under "H. Community Debts:"

9.b. **SEPARATE DEBTS: DEBTS INCURRED PRIOR TO MARRIAGE.** If you and your spouse did not owe money on any debts before you were married, check the first box and GO ON. If you owed money on debts before you were married, check the second box. If your spouse owed money on debts before you were married, check the third box. If either you or your spouse owes money on any debts you or your spouse brought into the marriage, describe the debts, and tell the court which debts you should pay and which debts your spouse should pay.

10. **TAX RETURNS:** Decide what you want to do about any income tax refund. Check the box that applies to you. If you have questions about which box you can check, you should see a lawyer, an accountant, and/or contact the Internal Revenue Service (IRS).

11. **SPOUSAL MAINTENANCE /SUPPORT (Alimony):** This is the term used to describe money paid from one spouse to the other spouse as part of a legal separation settlement. You may know the term as alimony. Spousal maintenance/ support is designed as a safety net for a spouse who cannot provide for his/her needs or who meets other requirements listed on the Petition under paragraph 11. The idea behind spousal maintenance/support is that accomplishments during your marriage, including increases in earning potential and living standards, are shared and earned by **BOTH** parties to a marriage. Look at paragraph 11 to see if spousal maintenance/support applies to you or your spouse. Check as many boxes as apply to your situation. Spousal maintenance/support is paid separately from child support and is **not** a substitute for, nor a supplement to, child support.

12. **OTHER STATEMENTS TO THE COURT:** You are telling the court that you believe the following statements are true. If the statements are not true, see a lawyer for help:

- Your marriage is irretrievably broken. This means that your marriage is over and you **do not** believe you can get back with your spouse.

- The conciliation requirements **do not** apply or have been met. This means that you **do not** think marriage counseling through the court will help you get back with your spouse or resolve your marital issues.

- This court has the power to decide child legal decision-making issues. Generally, this means that the children have lived in the State of Arizona for the past six (6) months, or if they are younger than six (6) months, since birth. **If this statement is not true, see a lawyer for help.**

13. **WRITTEN LEGAL DECISION-MAKING AGREEMENT.** Check this box **ONLY** if you and your spouse have a written agreement regarding legal decision-making, **parenting time** and child support that **both** of you signed **BEFORE** you filed the ***"Petition for Legal Separation"***. If you have only discussed these issues and do **not** have a written agreement, do **NOT** check this box.

REQUESTS TO THE COURT:

This section requests that the court grant you and your spouse your legal separation and tells the court other requests you are making:

A. **LEGAL SEPARATION.** This is your request to legally separate the parties. If you have questions about the advantages and/or disadvantages of filing for legal separation as compared to divorce, you should see a lawyer for help.

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

B.1. **SOLE LEGAL DECISION-MAKING:** If you want sole legal decision-making, check the box that applies, including the parenting time you are asking for. Tell the court whether you want legal decision-making of the children to go to you (the Petitioner) or your spouse (the Respondent).

PARENTING TIME: Check only one box. You can ask that the non-custodial parent (the parent having physical legal decision-making of the child less than 50% of the time) have one of the following types of parenting time (If you want to know more about legal decision-making and parenting time, read the Legal decision-making and Parenting Time booklet available at the Clerk's office).

Reasonable parenting time. This suggests an amount of parenting time appropriate to the age of the child(ren). The court offers suggested amounts of parenting time, but the amount can vary by agreement of both parents (Conciliation Court has information regarding age related parenting plans).

Supervised parenting time to the non-custodial parent. You should request supervised parenting time if the non-custodial parent cannot adequately care for the child(ren) without another person present. You may request this if the non-custodial parent has a problem with drugs or alcohol; is violent or abusive; or does not have the parenting skills to care for the child(ren) without another adult present. Remember, supervised parenting time is not intended to punish the parent, but to protect the child(ren).

No parenting time to the non-custodial parent. You should mark this option only if the non-custodial parent has seriously harmed, abused, or otherwise is a serious danger to the child(ren)'s physical and/or emotional health, or if there is a criminal court order stating no contact between the child and the non-custodial parent. You may use this as a last resort to protect the child.

OR

B.2. **JOINT LEGAL DECISION-MAKING:** If you are asking for joint legal decision-making, you must file before your court hearing a **"Joint Legal Decision-Making Agreement"** signed by both parents that the court must approve.

C. **CHILD SUPPORT:** Tell the court who you think should pay child support. The person who has Legal Decision-Making of the child(ren), or who has physical care of the child(ren) more than 50% of the time, is the person who should receive the support. The other spouse, often called the "non-custodial" parent, must pay the support. The income of the parties generally determines the amount of the support according to court guidelines (If you want to know more about child support, read the Child Support Payments in Arizona booklet available at the Clerk's office). You must check only one box.

D. **INSURANCE AND HEALTH CARE EXPENSES FOR CHILDREN:** Check only one box. Tell the court which parent should provide insurance for the child(ren). Whichever parent has the most affordable insurance plan available through work generally should pay for health insurance. Adjustments can be made to child support to reflect the costs of health insurance for the child(ren).

E. **TAX EXEMPTION:** Decide how you and your spouse will declare the tax dependency exemptions, for which child(ren), for which years. Federal Tax law also determines this for you. If you are not sure, see a lawyer and/or an accountant or for help.

F. **SPOUSAL MAINTENANCE/SUPPORT (ALIMONY):** This tells the court that you or your spouse should pay money to the other spouse on a monthly basis to help with living expenses. Check the first box if **YOU** (the Petitioner) will be paying spousal maintenance/support. Check the second box if **YOUR SPOUSE** (the Respondent) will be paying spousal maintenance/support. If you or your spouse should not pay spousal maintenance/support, **do not** check either box and GO ON. **(You can check a box only if you checked a corresponding box in the spousal maintenance/support section in paragraph 11.)** If you request spousal maintenance/support, choose what you believe to be a reasonable monthly amount and tell the court how long the money should be paid. Base the amount of any request on the receiving party's need and the income of the party paying this money.

Spousal maintenance/support is not a substitute for, nor a supplement to, court ordered child support.

G. **COMMUNITY PROPERTY.** This tells the court that your division of the property is fair.

H. **COMMUNITY DEBT.** This tells the court that your division of the debt is fair, and that the court should divide the debts as requested by you in your Petition. **If you have been separated from your spouse long enough that you or your spouse may have additional debts, write down the date of your separation on the line provided if you want each spouse to pay their debts incurred after you separated.**

I. **SEPARATE PROPERTY and DEBTS.** This states that you will keep the property you owned before the marriage and that your spouse will keep the property they owned before the marriage. It also says that you will pay your separate debts and your spouse will pay their separate debts.

J. **OTHER ORDERS:** Tell the court anything else you may want ordered that has not been covered in your Petition.

OATH OR AFFIRMATION AND VERIFICATION OF PETITIONER: Sign this form in front of a Clerk of the Superior Court or a notary public. By doing so, you are telling the Court that everything contained in the Petition is true, under penalty of perjury.

NOTICE OF RIGHT TO CONVERT HEALTH INSURANCE: This is an important document that explains what to do about health care coverage for yourself and your minor child(ren). Read it carefully, and be sure a copy is served on your spouse, along with the other legal separation papers.

AFFIDAVIT OF MINOR CHILDREN: You must complete this document. Fill in the information completely and to the best of your knowledge.

ORDER and NOTICE REGARDING THE PARENT INFORMATION PROGRAM: This is an important document. You and the other parent must attend and complete a class in the Parent Information Program. This is a very exciting and wonderful class. It was designed to help you. The purpose of the Parent Information Program is to give parents information about the impacts that legal separation, the changes in the family unit and court involvement have on minor children involved in a legal separation, paternity, or Legal Decision-Making case. This Notice applies to **all** parents who file an action for dissolution of marriage or legal separation, or any paternity proceeding, in which a party has requested that the court determine Legal Decision-Making, parenting time or support, and to all other domestic relations cases if ordered by the court. **Make sure you read this order and notice and serve the other party with it.**

NOTICE REGARDING CREDITORS: This is an important document that tells you and your spouse that you are responsible for community debts to creditors even though the court order or decree says that only one of you (either you or your spouse) are responsible. This notice must be served on your spouse. In addition, read this notice to find out how to obtain information from your creditors about account balances.

OTHER IMPORTANT PAPERS IN THIS PACKET:
Also attached is the packet for ***Service of Court Papers***. All of the instructions and forms are included.

CHANGE OF ADDRESS: It is very important for you (Petitioner and Respondent) to keep the court informed of your most current address. This means that if the address information on this form is incorrect or if you change addresses, you must contact the Clerk of the Court and give them your new or current address. Change of Address forms can be obtained from the following courthouse locations:

Pinal County Justice Complex
971 N. Jason Lopez Circle Bldg. A
Florence AZ 85132
(520) 866-5300

Apache Junction Office
575 N. Idaho Rd. Suite 109
Apache Junction, AZ 85119
(520) 866-5300

Casa Grande Office
820 E. Cottonwood Lane Bldg. B
Casa Grande, AZ 85122
(520) 866-5300

Mammoth Office
(Temporarily Closed)

PROCEDURES

How to File Legal Separation Papers with the Court

STEP 1: **ONCE YOU HAVE FILLED OUT THE DOCUMENTS AND YOU HAVE SIGNED THEM IN FRONT OF A NOTARY PUBLIC, YOU NEED TO MAKE COPIES:**

Make 2 copies of the following documents after you have filled out the forms and had your signature notarized:

- Summons
- Notice Regarding Creditors
- Notice of Right to Convert Health Insurance
- Court Order & Notice for Parent Education Class
- Child Support Worksheet
- Affidavit Regarding Minor Children
- Parenting Plan
- Preliminary Injunction
- Petition for Legal Separation with Children

STEP 2: **SEPARATE YOUR DOCUMENTS INTO THREE (3) SETS:**

SET 1 - ORIGINALS FOR CLERK OF COURT:

- Summons
- Notice Regarding Creditors
- Notice of Right to Convert Health Insurance
- Court Order & Notice for Parent Education Class
- Child Support Worksheet
- Parenting Plan
- Affidavit Regarding Minor Children
- Preliminary Injunction
- Sensitive Data Sheet
- Family Court Cover Sheet
- Petition for Legal Separation with Children

SET 2 - COPIES FOR SPOUSE:

- Summons
- Notice Regarding Creditors
- Notice of Right to Convert Health Insurance
- Court Order & Notice for Parent Education Class
- Child Support Worksheet
- Affidavit Regarding Minor Children
- Parenting Plan
- Preliminary Injunction
- Petition for Legal Separation with Children

SET 3 – COPIES FOR YOU:

- Summons
- Notice Regarding Creditors
- Notice of Right to Convert Health Insurance
- Court Order & Notice for Parent Education Class
- Child Support Worksheet
- Affidavit Regarding Minor Children
- Parenting Plan
- Preliminary Injunction
- Petition for Legal Separation with Children

STEP 3: **FILE THE PAPERS WITH THE CLERK OF THE SUPERIOR COURT:**

GO TO: **GO TO THE OFFICE OF THE CLERK OF THE SUPERIOR COURT TO FILE YOUR PAPERS:** The Clerk's Office is open from 8am-5pm, Monday-Friday. **You should arrive at the Clerk's Office at least two hours before it closes**.

You may file your court papers at the following locations:

Pinal County Justice Complex
971 N. Jason Lopez Circle Bldg. A
Florence AZ 85132
(520) 866-5300

Apache Junction Office
575 N. Idaho Rd. Suite 109
Apache Junction, AZ 85119
(520) 866-5300

Casa Grande Office
820 E. Cottonwood Lane Bldg. B
Casa Grande, AZ 85122
(520) 866-5300

Mammoth Office
(Temporarily Closed)

FEES: There is a filing fee for filing this Petition and there may be other charges associated with this case. Inquire with the Clerk's office regarding the filing fee amount or go online to www.coscpinalcountyaz.gov/fees.html for a list of current fees. Payment may be made by Cash, Money Order, Visa or MasterCard debit or credit.

If you cannot pay these fees, you may request the fee(s) be deferred or waived. The Clerk of the Superior Court has the necessary forms to ask for a deferral or waiver.

NOTE: With the Application for Deferral, there is a fee and you must provide proof of income (copy of your last 2 most recent paystubs)

PAPERS: Hand all three **(3)** sets of your court papers to the deputy clerk along with the filing fee. The clerk will file stamp and retain the originals and conform stamp your copies.

MAKE SURE YOU GET BACK THE FOLLOWING FROM THE CLERK:

- Your Original ***"Summons"***
- Your Set of Copies - Conformed
- Your Spouse's Set of Copies - Conformed

STEP 4: **SERVE THE PAPERS ON THE OTHER PARTY:**
You must now serve the other party (Respondent) with a set of conformed copies. Follow the instructions in the attached packet regarding **Service of Court Papers**.

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

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

NOTICE REGARDING CREDITORS

_____
Name of Respondent

HONORABLE: _____

ARIZONA LAW REQUIRES all actions for DIVORCE or LEGAL SEPARATION to include this NOTICE and for the person filing for Divorce or Legal Separation to SERVE this NOTICE on the other party. (ARS 25-318(F).

YOU AND YOUR SPOUSE ARE RESPONSIBLE FOR COMMUNITY DEBTS. The court usually requires/orders one spouse or the other to pay certain community debts in, or through, the Decree of Dissolution or Legal Separation. A court order that does this is binding on the spouses **only, not the creditors**. You and your spouse are legally responsible for these community debts whether you are married, divorced, or legally separated. These debts are matters of contract between **both of you** and your creditors (such as banks, credit unions, credit card companies, utility companies, medical providers and retailers). On request, the court may impose a lien against the separate property of a spouse to secure payment of certain community debts.

CONTACT CREDITORS: You may want to contact your creditors to discuss the debts and the effects of your divorce/legal separation on your debts. To assist you in identifying your creditors, you may obtain a copy of your spouse's credit report by making a written request to the court for an order requiring a credit reporting agency to release the report to you. The credit report will help you identify accounts, account numbers and account balances. In addition, within thirty **(30)** days after receipt of a request from a spouse who is party to a divorce or legal separation, which includes the court and cause number of the action, creditors are required, by law, to provide information as to the balance and account status of any debts for which you or your spouse may be liable to the creditor.

WARNING: If you do not understand this notice, you should contact an attorney for advice about your legal rights and obligations.

The following page contains a sample form you *may* choose to mail to creditors to get information about debts owed by you or your spouse. It is not a required form.

REQUEST FOR ACCOUNT INFORMATION FROM CREDITORS

You may use this form to request information about debt owed by you or your spouse.
If so, send to the creditor. **DO NOT FILE THIS PAGE WITH THE COURT**.

DATE: _____

CREDITOR'S NAME: _____

CREDITOR'S ADDRESS: _____

Regarding: **Superior Court of Arizona in Pinal County**

Case Name: _____

Case Number: _____

Pursuant to Arizona State Law (ARS 25-318), this letter requests the balance and account status of any debt for which the following individuals may be liable to you. (Arizona law requires that you provide this information within thirty (30) days of receipt of this letter.)

INFORMATION ABOUT DEBTORS/SPOUSES:

Your Name: _____

Your Address: _____

_____

Your Phone Number: _____

Your Spouse's Name: _____

Your Spouse's Address: _____

_____

INFORMATION ABOUT THE ACCOUNT:

Account Number(s): _____

If you have any questions or if I can be of further assistance, please feel free to contact me.

Sincerely,

Your Name: _____

Your Signature: _____

SUPERIOR COURT OF ARIZONA
PINAL COUNTY

_____
Name of Petitioner

CASE NUMBER: DO2

NOTICE OF YOUR RIGHTS ABOUT HEALTH INSURANCE COVERAGE WHEN A PETITION FOR DISSOLUTION (DIVORCE) IS FILED (A.R.S. 20-1377 AND 20-1408)

_____
Name of Respondent

HONORABLE: _____

WARNING: THIS IS AN IMPORTANT LEGAL NOTICE. YOUR RIGHTS TO HEALTH INSURANCE COVERAGE COULD BE AFFECTED AFTER YOUR DIVORCE IS FINAL. READ THIS NOTICE CAREFULLY. IF YOU DO NOT UNDERSTAND THIS NOTICE, YOU SHOULD CALL AN ATTORNEY FOR ADVICE ABOUT YOUR LEGAL RIGHTS AND OBLIGATIONS.

IMPORTANT INFORMATION IF YOU ARE ON YOUR SPOUSE'S INSURANCE PLAN: When a Petition for Dissolution of Marriage (papers for a divorce decree) is filed, you and/or your children may continue to be covered under your spouse's health insurance policy. Arizona law allows the dependent spouse and/or children to continue to be covered, but you must take some steps to protect your rights.

WHAT INSURANCE COVERAGE APPLIES TO YOU, AND HOW TO GET IT: If you are covered by your spouse's health insurance, and you want to continue to be covered after the divorce is final, you **must** contact the insurance company as soon as possible, and you **must** start to pay the monthly insurance premium within 31 days of the date the insurance would otherwise stop.

If you decide you want to be covered, the insurer can choose whether to continue coverage under the current policy, or to change the policy to your name. If the policy is changed to your name, it is called a "converted"; policy. If the policy is converted by the insurer, the insurer must provide you the same or the most similar level of coverage available, unless you ask for a lower level of coverage.

WHAT COVERAGE APPLIES TO YOUR CHILDREN: If you choose to continue coverage as a dependent spouse, you can also choose to continue coverage for your dependent children if you are responsible for their care or support.

PREEXISTING CONDITIONS OR EXCLUSIONS FROM INSURANCE COVERAGE: Whether the insurance is continued or converted, the insurance must be provided to you without proof of insurability and without exclusions for coverage other than what was previously excluded before the insurance was continued or converted.

LIMITS ON RIGHTS TO INSURANCE COVERAGE FOR YOU AND YOUR CHILDREN: You may **not** be entitled to continued or converted coverage if you are eligible for Medicare or for coverage by other similar types of insurance which together with the continued coverage would make you over-insured. However, dependent children of a person who is eligible for Medicare may be covered by a continuance or a conversion. If you have questions about coverage, check with the insurer and/or the spouse's employer.

WARNING TO THE SPOUSE FILING THE PETITION FOR DISSOLUTION (DIVORCE): This Notice must be served on your spouse together with the Petition for Dissolution, the Summons, and the Preliminary Injunction.

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:** Pay by personal check, cashier's check, money order, cash or credit card at any clerk's office 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 Worksheet

Your computer must be connected to a printer. Begin by selecting which Child Support Calculator applies to you, 2005 or 2011, 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 CONACT 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: _____

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

PRELIMINARY INJUNCTION

_____

Name of Respondent **HONORABLE:** _____

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

Your spouse has filed a ***"Petition for Dissolution"*** (Divorce) or ***"Petition for Annulment"*** or ***"Petition for Legal Separation"*** with the court. This Order is made at the direction of the Presiding Judge of the Superior Court of Arizona in Pinal County. This Order has the same force and effect as any order signed by the judge. You and your spouse **must** obey this Order. This Order may be enforced by any remedy available under the law, including an ***"Order of Contempt of Court."*** To help you understand this Order, we have provided this explanation. Read the explanation and then read the statute itself. **If you have any questions, you should contact a lawyer for help.**

EXPLANATION: (What does this Order mean to you?)

1. **ACTIONS FORBIDDEN BY THIS ORDER:** From the time the ***"Petition for Dissolution"*** (Divorce) or ***"Petition for Annulment"*** or ***"Petition for Legal Separation"*** is filed with the court, until the judge signs the Decree, or until further order of the court, both the Petitioner and the Respondent **shall not** do any of the following things:

- ✓ You may **not** hide earnings or community property from your spouse, **AND**
- ✓ You may **not** take out a loan on the community property, **AND**
- ✓ You may **not** sell the community property or give it away to someone, **UNLESS** you have the written permission of your spouse or written permission from the court. The law allows for situations in which you may need to transfer joint or community property as part of the everyday running of a business, or if the sale of community property is necessary to meet necessities of life, such as food, shelter, or clothing, or court fees and attorney fees associated with this action. If this applies to you, you should see a lawyer for help, **AND**
- ✓ Do **not** harass or bother your spouse or the children, **AND**
- ✓ Do **not** physically abuse or threaten your spouse or the children, **AND**
- ✓ Do **not** take the minor children, common to your marriage, out of the State of Arizona for any reasons, without a written agreement between you and your spouse or a Court Order, **before** you take the minor children out of the State.

- ✓ Do **not** remove, or cause to be removed, the other party or the minor children of the parties from any existing insurance coverage, including medical, hospital, dental, automobile and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.

STATUTORY REQUIREMENTS: Arizona Law, A.R.S. 25-315(A) provides:

1(a). **RESTRICTIONS ON PROPERTY OF THE MARRIAGE:** That both parties are enjoined from transferring, encumbering, concealing, selling, or otherwise disposing of any of the joint, common or community property of the parties, **except** if related to the usual course of business, the necessities of life, or court fees and reasonable attorney fees associated with an action filed under this article, without the written consent of the parties or the permission of the court.

1(b). **REQUIREMENTS OF BEHAVIOR:** That both parties are enjoined from molesting, harassing, disturbing the peace, or committing an assault or battery on, the person of the other party or any natural or adopted child of the parties.

1(c). **RESTRICTIONS ABOUT YOUR MINOR CHILDREN:** That both parties are enjoined from removing any natural or adopted minor child(ren) of the parties, then residing in Arizona, from the jurisdiction of the court without the prior written consent of the parties or the permission of the court.

1(d). **RESTRICTIONS ABOUT INSURANCE:** That both parties are enjoined from removing, or causing to be removed, the other party or the minor children of the parties from any existing insurance coverage, including medical, hospital, dental, automobile and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.

2. **EFFECTIVE DATE OF THIS ORDER:** This Order is effective against the person who filed for divorce, annulment, or legal separation (the Petitioner) when the Petition was filed with the court. It is effective against the other party (the Respondent) when it is served on the other party, or on actual notice of the Order, whichever is sooner. This Order shall remain in effect until further order of the court, or the entry of a Decree of Dissolution, Annulment, or Legal Separation.

3. **ORDER TO PETITIONER:** You **must** serve a copy of this Order upon the Respondent, along with a copy of the Petition for Dissolution, Annulment or Legal Separation, the Summons, and other required court papers.

4. **WARNING:** This is an official Court Order. If you disobey this Order, the court may find you in contempt of court. You may also be arrested and prosecuted for the crime of interfering with judicial proceedings and any other crime you may have committed by disobeying this Order.

5. **LAW ENFORCEMENT:** You or your spouse may file a certified copy of this Order with your local law enforcement agency. You may obtain a certified copy from the Clerk of the Court that issues this Order. If any changes are made to this Order and you have filed a certified copy of this Order with your local law enforcement agency, you **must** notify them of the changes.

6. **DESCRIPTION OF THE PARTIES:**

Petitioner:
Name: _____ Gender: ☐ Male ☐ Female
Height: _____ Weight: _____
Date of Birth: _____

Respondent:
Name: _____ Gender: ☐ Male ☐ Female
Height: _____ Weight: _____
Date of Birth: _____

GIVEN UNDER MY HAND AND SEAL OF THE COURT _____
Date

AMANDA STANFORD
Clerk of the Superior Court

By _____
Deputy Clerk

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

CASE NUMBER: DO2

PETITION FOR LEGAL SEPARATION WITH CHILDREN [624]

_____
Name of Respondent

HONORABLE: _____

STATEMENTS MADE TO THE COURT, UNDER OATH:

1. INFORMATION ABOUT ME, THE PETITIONER:
Name:_____
Address: _____
Date of Birth:_____
Job Title: _____
Starting with today number of months/years in a row you, the Petitioner, have lived in Arizona: _____

2. INFORMATION ABOUT MY SPOUSE, THE RESPONDENT:
Name: _____
Address: _____
Date of Birth: _____
Job Title: _____
Starting with today number of months/years in a row the Respondent has lived in Arizona:_____

3. INFORMATION ABOUT MY MARRIAGE:
Date of Marriage:_____
City and state or country where we were married:_____
☐ We **do not** have a covenant marriage. (**Warning: You cannot use this paperwork, if this statement if you have a covenant marriage**. If you have questions about whether you have a covenant marriage, review your marriage license, and/or see a lawyer for help.)

4. 90 DAY REQUIREMENT:
☐ I or ☐ my spouse have lived, or have been stationed while a member of the Armed Forces, in Arizona for at least 90 days before I filed this action. **(WARNING: If this statement is not true, you cannot file for a Legal Separation until it becomes true.)**

5. **DOMESTIC VIOLENCE:** (Check the box that is ***true*** if you intend to ask for joint Legal Decision-Making): Domestic violence ☐ has not occurred during this marriage or ☐ Domestic violence has occurred.

6. **CHILDREN OF THE PARTIES WHO ARE LESS THAN 18 YEARS OLD** (check one box)**:**

☐ There are **no** children under the age of 18 either born to, or adopted by, the parties.
NOTE: IF YOU CHECKED THIS BOX, STOP. YOU SHOULD BE USING THE PACKET TO GET A LEGAL SEPARATION WITHOUT CHILDREN.

☐ The following child(ren) is/are under age 18 and were born to or adopted by my spouse and me (Attach extra pages if necessary):

Child's Name:_____
Birth Date:_____
Address:_____
Length of Time at Address:_____

Child's Name:_____
Birth Date: _____
Address:_____
Length of Time at Address:_____

Child's Name: _____
Birth Date:_____
Address: _____
Length of Time at Address:_____

Child's Name: _____
Birth Date:_____
Address:_____
Length of Time at Address:_____

7. **PREGNANCY:**

☐ Wife is **not** pregnant, OR
☐ Wife **is** pregnant
The baby is due on _____ (date), and (check one box below):
☐ The Petitioner and Respondent are the parents of the child, OR
☐ Petitioner is **not** the parent of the child, OR
☐ Respondent is **not** the parent of the child.

8.a. **COMMUNITY PROPERTY: (check one box)**

☐ My spouse and I did not acquire any community property during the marriage, OR
☐ My spouse and I acquired community property during our marriage, and we should divide it as follows:

	Petitioner	Respondent	Value
☐ **Real estate located at:** _____	☐	☐	$_____

Legal Description: _____
_____
_____

	Petitioner	Respondent	Value
☐ **Real estate located at:** _____	☐	☐	**$**_____

Legal Description: _____
_____
_____

☐ **Household furniture and appliances:**

	Petitioner	Respondent	Value
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Household furnishings:**

	Petitioner	Respondent	Value
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Other items:**

	Petitioner	Respondent	Value
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Pension/retirement fund/profit sharing/stock plan/401K:**

	Petitioner	Respondent	Value
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Motor vehicles:**

	Petitioner	Respondent	Value
Make _____ Model _____ VIN _____ Lien Holder _____	☐	☐	$_____

	Petitioner	Respondent	Value
Make _____ Model _____ VIN _____ Lien Holder _____	☐	☐	$_____

8.b. SEPARATE PROPERTY: (Check all boxes that apply.)

☐ I **do not** have any property, or separate property, that I brought into the marriage.

☐ My spouse, the Respondent, **does not** have any property, or separate property, that they brought into the marriage.

☐ I **do** have property, or separate property, that I brought into the marriage. I want this property awarded to me as described below.

☐ My spouse, the Respondent, **does have** property, or separate property, that they brought into the marriage. I want this property awarded to my spouse as described below.

Separate Property: (List the property and the value of the property, and check the box to tell the Court who should get the property.)

Description of Separate Property	Petitioner	Respondent	Value
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

9.a. COMMUNITY DEBTS: (check one box)

☐ My spouse and I **did not** incur any community debts during the marriage, OR

☐ My spouse and I **did** incur community debts during the marriage and we should divide the

DESCRIPTION OF DEBT	Petitioner	Respondent	Amount Owed
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

9.b. SEPARATE DEBTS: (Check all boxes that apply.)

☐ My spouse and I do **not** have any debts that were incurred prior to the marriage or separate debt;

☐ I have separate debt or debt that I incurred prior to the marriage that should be paid by me as described below;

☐ My spouse has separate debt or debt that he or she incurred prior to the marriage that should be paid by my spouse as described below.

DESCRIPTION OF DEBT	Petitioner	Respondent	Amount Owed
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

10. TAX RETURNS: (Check this box if this is what you want.)

☐ After the judge or commissioner signs the Order of Legal Separation, we will, subject to IRS Rules and Regulations, pay federal and state taxes as follows: For previous years (the years we were married, **not** including the year the Order was signed), the parties will file joint federal and state income tax returns. In addition, for previous calendar years, both parties will pay, and hold the other harmless from,1/2 of all additional income taxes if any and other costs and each will share equally in any refunds. For the calendar year (the year that the Order is signed) and all future calendar years, each party will, subject to IRS Rules and Regulations, file separate federal and state income tax returns. Each party will give the other party all necessary documentation to do so.

11. SPOUSAL MAINTENANCE/SUPPORT (ALIMONY) (check the box that applies to you):

☐ Neither party is entitled to spousal maintenance/support (alimony), OR

☐ Petitioner OR ☐ Respondent is entitled to spousal maintenance/support because: (Check one or more of the box(es) that apply. At least one reason must apply to get spousal maintenance/ support.)

☐ Person lacks sufficient property to provide for his/her reasonable needs;
☐ Person is unable to support himself/herself through appropriate employment;
☐ Person is the custodian of a child(ren) whose age or condition is such that the person should not be required to seek employment outside the home;
☐ Person lacks earning ability in the labor market adequate to support himself/herself; and,
☐ Person contributed to the educational opportunities of the other spouse or had a marriage of long duration and is now of an age that precludes the possibility of gaining employment adequate to support himself/herself.

12. OTHER STATEMENTS TO THE COURT UNDER OATH: To file for Legal Separation, of a non-covenant marriage, you must be able to tell the court that the following statements are true. If the statements are not true, you cannot file for Legal Separation until the statements are true. Check the box in front of each statement if the statement is true.

☐ TRUE My spouse and I have attempted to resolve our problems by using Conciliation Services, our going to Conciliation Services to try to resolve our problems would not work.
☐ TRUE This court has jurisdiction to decide child legal decision-making matters under Arizona law.

13. WRITTEN LEGAL DECISION-MAKING AGREEMENT: (Check the boxes that apply, if they apply)

☐ My spouse and I have a written agreement signed by both of us about the Legal Decision-Making, parenting time, and child support for our child(ren). I have attached a copy of the written agreement.

☐ My spouse and I **do not** have a written agreement or there is a dispute regarding Legal Decision-Making and we need to go to mediation to resolve this issue before the Order is submitted; as per Local Rule 4.2.

REQUESTS TO THE COURT:

A. LEGAL SEPARATION:
☐ An Order of Legal Separation.

B. CHILD LEGAL DECISION-MAKING AND PARENTING TIME: Award Legal Decision-Making and parenting time of the children under the age of 18 years and common to the parties, whether by birth or adoption, as follows: (Check either the sole Legal Decision-Making box or the joint Legal Decision-Making box. If you check the sole Legal Decision-Making box, check only one box related to parenting time.)

B.1. ☐ **SOLE LEGAL DECISION-MAKING** of the minor child(ren) awarded to ☐ Petitioner OR ☐ Respondent, subject to parenting time as follows:

☐ **Reasonable Parenting Time** rights to the parent not having Legal Decision-Making, as will be described in the Parenting Plan attached to the Order for Legal Separation.

☐ **Supervised Parenting Time** between the children and the ☐ Petitioner OR ☐ Respondent is in the best interest of the children because: (Explain the reasons for need for supervised parenting time. Use extra paper if necessary.)_____

_____

Name of the agency/person who will supervise:_____

Requested restrictions on parenting time: (explain here)

_____

_____

The cost of supervised parent/child access will be paid by ☐ the parent being supervised; ☐ the parent having Legal Decision-Making; ☐ shared equally by the parties.

☐ **No Parenting Time** rights to the parent not having Legal Decision-Making, is in the best interest(s) of the child(ren) because: (Explain the reasons for no parenting time. Use extra paper if necessary):

_____

OR

B.2. ☐ **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 signed by the parties, if the court agrees with the Joint Legal Decision-Making Agreement. (Remember, you must submit a Parenting Plan in writing before the Court will consider joint Legal Decision-Making; as per A.R.S. 25-403 (F).)

C. **CHILD SUPPORT:** Order that child support will be paid by ☐Petitioner, OR ☐ Respondent in a reasonable amount as determined by the court under the Arizona Child Support Guidelines. Support payments will begin on the first day of the first month following the entry of the Legal Separation decree. These payments, and a fee for handling, will be paid through the Clerk of the Court/Clearinghouse and collected by automatic wage assignment.

D. **INSURANCE AND HEALTH CARE EXPENSES FOR CHILDREN:** Order that ☐ Petitioner, OR ☐ Respondent will pay for the health, medical, and dental insurance coverage for the child(ren), under the age of 18 years, common to the parties. Petitioner and Respondent will pay for all reasonable unreimbursed medical, dental, and health-related expenses incurred for the child(ren) in proportion to their respective incomes.

E. **TAX EXEMPTION:** The parties will claim the children as income tax dependency exemptions on federal and state income tax returns as follows:

Parent entitled to claim	Name of child	Current tax year	Later tax years
☐Petitioner ☐ Respondent			
☐Petitioner ☐ Respondent			
☐Petitioner ☐ Respondent			
☐Petitioner ☐ Respondent			

F. **SPOUSAL MAINTENANCE/SUPPORT (ALIMONY):**
☐Order spousal maintenance/support to be paid by ☐Petitioner, or ☐ Respondent through the Clerk of the Court/Clearinghouse in the amount of $_____ per month, plus the statutory fee, beginning with the first day of the month **after** the Judicial Officer signs the Order of Legal Separation and continuing until the person receiving spousal maintenance/support is remarried or deceased, or for a period of _____months.

G. **COMMUNITY PROPERTY:**
Make a fair division of all community property as requested in this petition.

H. **COMMUNITY DEBTS:**
Order each party to pay community debts as requested in the Petition, and to pay any other community debts unknown to the other party. Order each party to pay and hold the other party harmless from debts incurred by them since the parties' separation on (date)_____ or from the date the Respondent was served with the Petition for Legal Separation.

I. **SEPARATE PROPERTY and DEBT:** Award each party their separate property and make each party pay their own separate debt.

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

_____

_____

_____

_____

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)

Revised 02.24.16

SERVICE OF COURT PAPERS FAMILY COURT CASES ONLY

(When Parties <u>AGREE</u> to all terms of the Separation)

PINAL COUNTY

HOW TO SERVE NOTICE AS REQUIRED OR PERMITTED BY LAW

STEP 2

(Please complete step two before proceeding to the next step)

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

HOW TO SERVE COURT PAPERS ON THE OTHER PARTIES

TABLE OF CONTENTS

This packet contains general information, court forms, instructions and procedures for ***serving*** court papers, delivering court papers as permitted or required by law. Use **only** the forms that apply to the method of service you have chosen. Do **NOT** copy or file information, instruction or procedures pages with the Court.

Order	Title	# of Pages
1	Table of Contents (this page)	1
2	Family Court Acceptance of Service	3
3	How to Serve the Other Party by Certified Mail	1
4	Affidavit Supporting Service by Certified Mail	2

You have permission to use them 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.

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

FAMILY COURT
ACCEPTANCE OF SERVICE
A.R.F.L.P. RULE 40

_____
Name of Respondent

HONORABLE: _____

Check the box to indicate each document you received. Do **not** check the box unless you received the document listed beside it. If your case is not one of the types listed, list the type of case and the documents you received from the other party under "Other Type Case" on the next page.

1. **BY SIGNING THIS DOCUMENT, I STATE UNDER OATH OR AFFIRMATION THAT I HAVE RECEIVED AND ACCEPTED THE LEGAL PAPERS INDICATED** (CHECKED) **BELOW**

DIVORCE (OR ANNULMENT)
WITH CHILDREN

- ☐ Petition
- ☐ Summons
- ☐ Preliminary Injunction
- ☐ Health Insurance Notice
- ☐ Parent Info. Program Notice
- ☐ Notice to Creditors
- ☐ Affidavit Regarding Minor Children
- ☐ Parenting Plan
- ☐ Child Support Worksheet

LEGAL SEPARATION
WITH CHILDREN

- ☐ Petition
- ☐ Summons
- ☐ Preliminary Injunction
- ☐ Health Insurance Notice
- ☐ Parent Info. Program Notice
- ☐ Notice to Creditors
- ☐ Affidavit Regarding Minor Children
- ☐ Parenting Plan
- ☐ Child Support Worksheet

TEMPORARY ORDERS

- ☐ Motion for Temporary Order
- ☐ Order to Appear
- ☐ Temporary Orders
- ☐ Affidavit of Financial Info.
- ☐ Child Support Worksheet
- ☐ Parenting Plan

DIVORCE (OR ANNULMENT)
WITHOUT CHILDREN

- ☐ Petition
- ☐ Summons
- ☐ Preliminary Injunction
- ☐ Health Insurance Notice
- ☐ Notice to Creditors

LEGAL SEPARATION
WITHOUT CHILDREN

- ☐ Petition
- ☐ Summons
- ☐ Preliminary Injunction
- ☐ Health Insurance Notice
- ☐ Notice to Creditors

PATERNITY (TO ESTABLISH)

- ☐ Petition
- ☐ Summons
- ☐ Parent Info. Program Notice
- ☐ Affidavit Regarding Minor Children
- ☐ Parenting Plan
- ☐ Child Support Worksheet

CHILD LEGAL DECISION-MAKING, PARENTING TIME, SUPPORT
(to establish when paternity already *legally* established)
☐ Petition
☐ Summons
☐ Parent Info. Program Notice
☐ Affidavit Regarding Minor Children
☐ Parenting Plan
☐ Child Support Worksheet

CHILD SUPPORT
(to establish when paternity already *legally* established)
☐ Petition
☐ Order to Appear
☐ Child Support Worksheet

ENFORCEMENT
☐ Petition ☐ Order to Appear

MODIFY CHILD SUPPORT 15% OR MORE
("Simplified Mod")
☐ Petition to Modify
☐ Parents Worksheet for Child Support
☐ Blank Request for Hearing

MODIFY SPOUSAL MAINTENANCE *OR* SPOUSAL *AND* CHILD SUPPORT ("Standard Mod")
☐ Petition to Modify Support Order
☐ Order to Appear
☐ Affidavit of Financial Information

MODIFY CHILD SUPPORT ("Standard Mod")
☐ Petition to Modify Child Support – Std. Process
☐ Affidavit of Financial Information
☐ Order to Appear

MODIFY CHILD LEGAL DECISION-MAKING &/OR PARENTING TIME AND SUPPORT
☐ Petition to Modify
☐ Parents' Worksheet for Child Support
☐ Notice of Filing for Modification of Legal decision-making
☐ Affidavit Regarding Minor Children

STOP ORDER OF ASSIGNMENT/ INCOME WITHHOLDING ORDER
☐ Petition to Stop Order of Assignment
☐ Blank Request for Hearing

MODIFY (Change) **ORDER OF ASSIGNMENT/ INCOME WITHHOLDING ORDER**
☐ Petition to Modify Order of Assignment
☐ Blank Request for Hearing

LIST OTHER CASE TYPE HERE: (Example: "Annulment") _____
(Below, list name of each document you received: Example: "Petition for Annulment", "Summons", etc.)

_____ _____ _____
_____ _____ _____
_____ _____ _____
_____ _____ _____

2. **ACCEPT AND WAIVE FORMAL SERVICE.** I waive formal service of process by a process server or sheriff. I understand accepting these papers is the same as if I were personally served under Arizona Law [A.R.F.L.P. Rule 40 (F)]

3. **RESPONSE DEADLINE.** I am aware that accepting service of these court papers and signing this paper does not affect my right or obligation to file a written Response or Answer to this action if I do not agree with any relief asked for in the Petition. I understand I must Respond or Answer within **20** days from the day I signed the original of this Acceptance of Service if I accepted service in Arizona, or **30** days if I received the papers somewhere other than in Arizona.

4. **DEFAULT JUDGMENT, ORDER OR DECREE.** I understand that if I do not appear and defend in this action in court, within the time allowed by law, that I may lose my right to be heard in this case. I understand that failure to Respond or Answer could result in the court giving the other party any and all things requested in his or her legal papers, through a Default Judgment, Order or Decree.

5. RESTORE NAME. (ONLY in Divorce, Legal Separation or Annulment Cases.)

My complete married name is: (Complete ONLY if you want to change your name)

_____

I want my legal name restored to: (List complete maiden name or legal name before this marriage)

_____

BY SIGNING BELOW, I swear or affirm that I have read and understand the contents of this document and that I have received and accepted the legal documents indicated above.

_____ _____

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)

PROCEDURES

How to Serve Court Papers by Certified Mail

USE THIS PROCEDURE ONLY after you have filed your papers with the court.

STEP 1: **GO TO THE POST OFFICE** and tell the clerk you would like to mail the other party a letter as follows:

- Certified Mail, and
- Deliver to Addressee Only, and
- Restricted Delivery, and
- Return Receipt Requested, and
- Pay the postage.

STEP 2: **WAIT** for green receipt to be returned with the other party's signature. When you get the green receipt, note the date the other party received and signed for the papers.

STEP 3: **PAPERS FOR THE COURT**

- **COMPLETE:** Original of ***"Affidavit of Service by Certified Mail."*** Fill in *ALL* information requested on the form before proceeding. Be sure you fill in the date the other party received the papers. If you are unsure of the date, use the date you received the return receipt card. If you fail to list a date, the court may not process your papers and your case may be delayed.

- **ATTACH:** You must attach the original green receipt to the Affidavit to prove how you served the other party.

- **COPY:** Make yourself a copy of the ***"Affidavit of Service by Certified Mail"*** and a copy of the green receipt to keep for your files.

STEP 4: **FILE PAPERS WITH THE COURT.** File the Original ***"Affidavit of Service by Certified Mail"*** and the original green receipt with the Clerk of the Court.

STEP 5: **COUNT.** Note the date the other party was served the papers and start counting the days the other party has to file a Response or Answer. (When counting the days, start counting with the day **after** the other party signed the green receipt.)

DO NOT BRING CHILDREN TO 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

_____
Name of Petitioner

CASE NUMBER: DO2

AFFIDAVIT OF SERVICE BY CERTIFIED MAIL

_____
Name of Respondent

HONORABLE: _____

1. I am familiar with the facts stated in this Affidavit, and I make this Affidavit to show that I have served the court papers on the other party by certified mail, postage prepaid, return receipt requested, pursuant to Arizona Rules of Civil Procedure, Rule 4.2(c).

Person served (name of other party): _____

Address where other party was served: _____

_____

Date of receipt by the other party: _____ ***Date of return of receipt to sender:*** _____

2. The following documents were sent to the other party by certified mail **(List all of the documents sent to the other party):**

_____

_____

These court papers were received by the other party as shown by the ***original RETURN*** receipt that is attached to this Affidavit.

_____ _____
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)

ATTACH THE ORIGINAL MAIL RETURN RECEIPT HERE

Revised 02.24.16

CONSENT DECREE

FOR LEGAL SEPARATION WITH CHILDREN

(When Parties <u>AGREE</u> to all terms of the Divorce)

PINAL COUNTY

NON-COVENANT MARRIAGE

To Get A Legal Separation Order/Consent Decree

<u>STEP 3</u>

(Please complete step three before proceeding to the next step)

INSTRUCTIONS AND FORMS

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

CONSENT DECREE FOR LEGAL SEPARATION FOR A NON-COVENANT MARRIAGE WITH CHILDREN

This packet contains court forms and instructions to get a decree of legal separation for a non-covenant marriage with children. The documents should appear in order as follows.

Order	Title	# of Pages
1	Table of Contents (this page)	1
2	What the Decree Means & Utilizing a Consent Decree	1
3	Procedures: How to file a Consent Decree	2
4	Consent Decree of Legal Separation with Children	14
5	Child Support Order	6
6	Income Withholding for Support	13
7	Parenting Plan	9

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.

CRITERIA FOR UTILIZING A CONSENT DECREE

- You or your spouse filed a petition for Divorce or Petition for Legal Separation **AND**,
- You do not have a "covenant" marriage **AND**,
- You and your spouse agree to all terms of the divorce or legal separation such as division of property and debt, whether there will be spousal maintenance (alimony) and if so, how much, and if there are minor children, you agree on all terms of legal decision-making, support and parenting time **AND**,
- You and your spouse will provide your notarized signatures on the "Consent Decree" to indicate your agreement on all terms; **AND**,
- If your case involves minor children, you and your spouse have attended, or will attend, the Parent Information Program before you file a Consent Decree;
- DO NOT USE THESE FORMS IF:
- You disagree on any terms of the divorce or legal separation;

INSTRUCTIONS FOR SUBMITTING A CONSENT DECREE

1. The Consent Decree may be submitted **61** days from the date of service upon the Respondent.
2. Fill out the Consent Decree in black ink. Please make sure to fill out the Consent Decree in full.
3. Once the Consent Decree has been filled out in full, both the Petitioner and Respondent will need to sign and date the Consent Decree in front of a Notary Public.
4. After the Consent Decree has been notarized you will need to make two (2) copies.
5. You will need to obtain two (2) appropriate sized self addressed stamped envelopes. One envelope will need to be addressed to the Petitioner and the additional envelope will need to be addressed to the Respondent.
6. When submitting the Consent Decree to the Superior Court you will then bring the original Consent Decree, two copies and two self addressed stamped envelopes.
7. The Consent Decree will then be sent to the Judges office for approval. If approved you will receive your final Consent Decree in the Mail.
8. **IF YOU ARE FILING FOR DIVORCE WITH CHILDREN:**
   Also provide the following documents:
   1. Child Support Order
   2. Income Withholding Order
   3. A Copy of the Parenting Plan to attach to the Consent Decree as **EXHIBIT B**

PROCEDURES

How to File a Consent Decree with the Court for Legal Separation of a Non-Covenant Marriage - with Minor Children

IMPORTANT: The Consent Decree must be submitted 61 days from the date of service up the Respondent.

STEP 1: **Complete the form - TYPE OR PRINT IN BLACK INK**

Both the Petitioner and Respondent will need to sign and date the Consent Decree in front of a Notary Public.

STEP 2: Make 2 Copies of the document after they have been filled out and signed by a Notary Public.

STEP 3: **SEPARATE YOUR DOCUMENTS INTO THREE (3) SETS:**

SET 1: Originals for Clerk of Court

SET 2: Copies for Spouse

SET 3: Copies for You

IF YOU ARE FILING FOR LEGAL SEPARATION WITH CHILDREN:
Also provide the following documents:

1. Child Support Order
2. Income Withholding Order
3. A copy of the Parenting Plan to attach to the Consent Decree

You will need to obtain two (2) appropriate sized self-addressed stamped envelopes. One envelope will need to be addressed to the Petitioner and the additional envelope will need to be addressed to the Respondent.

STEP 4: **SUBMIT THE PAPERS WITH THE CLERK OF THE SUPERIOR COURT:**

In Person:

Go to the Clerk of Court filing counters at one of the following locations: The court is open from 8am-5pm, Monday-Friday. You should go to the Court at least two (2) hours before it closes.

Pinal County Justice Complex
971 N. Jason Lopez Circle, Bldg A
Florence, AZ 85132
(520) 866-5300

Mammoth Office
(Temporarily Closed)

Casa Grande Office
820 E. Cottonwood Lane, Bldg. B
Casa Grande, AZ 85122
(520) 866-5300

*Closed for lunch between
12:00 pm - 1:00 pm

Apache Junction Office
575 N. Idaho Rd. Suite 109 Apache
Junction, AZ 85119
(520) 866-5300

*Closed for lunch between
12:00 pm – 1:00 pm

By Mail: **Clerk of the Superior Court**
P.O. Box 2730
Florence, AZ 85132

STEP 5: The Consent Decree will then be sent to the Judges office for approval. If approved you will receive your final Consent Decree in the Mail.

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: _____

CONSENT DECREE OF

☐ **DISSOLUTION OF MARRIAGE (DIVORCE)**
☐ **LEGAL SEPARATION**
☐ **With Minor Children** ☐ **Without Minor Children**
in a Non-Covenant Marriage

HONORABLE: _____

THE COURT FINDS:

1. This case has come before this court for a final Decree of Dissolution of Marriage or Legal Separation. The court has taken all testimony needed to enter a Decree, or the court has determined testimony is not needed to enter the Decree.

2. This court has jurisdiction over the parties under the law; the provisions of this Decree are fair and reasonable under the circumstances and in the best interests of the minor child(ren) as to legal decision-making, parenting time and support, and the division of property and debt is fair and equitable.

THE COURT FURTHER FINDS THAT:

3. **ARIZONA RESIDENCY**. The requirements of A.R.S. §25-312 for dissolution of marriage, or A.R.S. § 25-313 for legal separation have been met: At the time this action was filed, the Petitioner or the Respondent was domiciled in Arizona or was stationed in Arizona while a member of the United States Armed Forces. If this is an action for dissolution of marriage (divorce), the Petitioner or the Respondent was domiciled or stationed in Arizona for more than 90 days.

4. **CONCILIATION COURT.** The provisions relating to the Conciliation Court either do not apply or have been met.

5. **IRRETRIEVABLY BROKEN OR SEPARATE AND APART.** The marriage is irretrievably broken or the parties desire to live separate and apart.

6. **COVENANT MARRIAGE.** This is a non-covenant marriage.

7. **LEGAL DECISION-MAKING, SUPPORT, SPOUSAL MAINTENANCE/SUPPORT, DIVISION OF PROPERTY AND DEBT.** Where it has the legal power and where it is applicable to the facts of this case, this court has considered, approved, and made orders relating to issues of child legal decision-making, parenting time, child support, spousal maintenance/ support (alimony), and the division of property and/or debts.

8. **PROTECTIVE ORDERS.** Following is the effect, if any, of this Consent Decree on any existing protective orders:

_____

_____

9. **COMMUNITY PROPERTY AND DEBT.** (Select One)

☐ The parties **DID NOT** acquire any community property or debt during the marriage,

OR

☐ The parties **HAVE** agreed to a division of community property and/or debt as evidenced by their signatures on **"Exhibit A"** attached to and incorporated into this Decree.

10. **PREGNANCY OR PATERNITY.** (Select one.)

☐ Wife is not pregnant, **OR**
☐ Wife is pregnant, and the husband ☐ **IS OR** ☐ **IS NOT** the father of the child.

11. **SPOUSAL MAINTENANCE/SUPPORT.** (Select one.)

☐ A party is entitled to an award of Spousal Maintenance/Support for the reason that
☐ Petitioner, **OR** ☐ Respondent

Lacks enough property, including property given to him or her as part of this divorce or legal separation, to provide for his or her reasonable needs, and is unable to support himself or herself through an appropriate job, or he or she is providing the primary care to child(ren) of young age or is of a condition that they should not be required to look for work outside the home, or lacks earning ability necessary to support himself or herself, or contributed significantly to the educational opportunities of the other spouse, or had a marriage that lasted a long time and is of an age that may severely limit the possibility of getting a job to support himself or herself, OR

☐ Neither party is entitled to an award of Spousal Maintenance/Support.

If spousal maintenance is to be awarded, the parties further agree: (Select One)

☐ Spousal maintenance award shall be modifiable in accordance with Arizona law, **OR**

☐ The parties acknowledge that the circumstances of their futures are unknown, but each desires that this maintenance award, so awarded by their agreement, not be modifiable in the future for any reason. Therefore, it is at this time ordered that this spousal maintenance award shall NOT be modifiable for any reason.

12. **PARENT INFORMATION PROGRAM.**

☐ **DOES NOT APPLY. THERE ARE NO MINOR CHILDREN IN THIS MARRIAGE.** (If no children, check the box and go to "13")

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. In accord with A.R.S § 25-353, the Court may deny any request to enforce or modify the provisions of this decree which address legal decision-making or parenting time 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. In accord with A.R.S § 25-353, the Court may deny any request to enforce or modify the provisions of this decree which address legal decision-making or parenting time until Respondent has completed the class.

13. CHILD SUPPORT. (Select any that apply.)

☐ **DOES NOT APPLY. THERE ARE NO MINOR CHILDREN IN THIS MARRIAGE.**

a. ☐ Child support has been determined in accordance with the Arizona Child Support Guidelines. **OR**

b. ☐ Application of the Arizona Child Support Guidelines in this case is inappropriate or unjust. The Court has considered the best interests of the minor child(ren) in determining that a deviation is appropriate and makes the following findings:

The child support amount before deviation is: $ _____

The child support amount after deviation is: $ _____

☐ The Court finds the guidelines amount is inappropriate or unjust because:

_____

_____

☐ Attached written agreement incorporated **AND**

☐ All parties have signed the agreement free of duress and coercion.

☐ Other:

_____

_____

c. ☐ Physical Legal Decision-Making Adjustment, Court Approved Discretionary Parenting Time Adjustment or other Adjustments. (The court must make written findings if any of these adjustments are made.) :

_____

_____

d. ☐ Ability to Pay. The Court finds that the person responsible for paying child support has the ability to pay child support:

☐ In the amount entered on Line 34 of the Worksheet of $ _____ **OR**

☐ In an adjusted amount calculated using the self-support reserve on the Parent's Worksheet for Child Support Amount of $ _____

14. LEGAL DECISION-MAKING OF MINOR CHILD(REN). (Select any that apply.)

☐ **DOES NOT APPLY. THERE ARE NO MINOR CHILDREN IN THIS MARRIAGE.**

a. ☐ **Joint Legal Decision-Making**. If joint Legal Decision-Making is awarded the court makes the following findings:

The Legal Decision-Making order or agreement is in the best interests of the minor child(ren) for the following reasons: (List the reasons.) _____

_____

_____

Domestic Violence.

☐ Domestic violence **has not occurred** during this marriage, **OR**

☐ 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: _____

_____

b. ☐ **Supervised or No Parenting Time**. (Check and complete only if supervised parenting time or no parenting time is ordered.)

☐ **Supervised Parenting Time** between the children and ☐ Petitioner **OR** ☐Respondent, is in the best interests of the minor child(ren), for the following reasons: (Explain the reasons) _____

_____

OR

☐ **No Parenting Time** by ☐ Petitioner **OR** ☐ Respondent, is in the best interests of the minor child(ren), for the following reasons: (Explain).

_____

_____

_____

THE COURT ORDERS:

1. LEGAL SEPARATION OR DISSOLUTION OF MARRIAGE ("Divorce").

☐ **THE PARTIES ARE LEGALLY SEPARATED.**
☐ **MARRIAGE IS DISSOLVED:** The marriage of the parties is dissolved and the parties are restored to the legal status of single persons.

NAMES:

☐ The name of the ☐ Wife **OR** ☐ The Husband, whose complete married name is:

Is restored to: (List the complete legal name or maiden name as before the marriage)

2. ENFORCEMENT OF TEMPORARY ORDERS.

☐ All obligations ordered to be paid by the parties in Temporary Orders dated (fill in dates of ALL temporary orders here)

_____

_____

_____

are satisfied in full.

OR

☐ Judgment is awarded against the party with the obligation up to the amount due and owing as of the date of this Decree, with the highest legal interest allowed by law, for the total amount of $ _____

3. CHILD LEGAL DECISION-MAKING, PARENTING TIME, AND CHILD SUPPORT.

☐ **DOES NOT APPLY. THERE ARE NO MINOR CHILDREN IN THIS MARRIAGE *and* THE WIFE IS NOT PREGNANT.** (Skip to "4")

a. PREGNANCY.

☐ A child who is common to the parties is expected to be born _____(DATE).

☐ All orders below as to Legal Decision-Making, parenting time, support, and medical insurance/expenses include this child and all other children named below. **OR**

☐ The orders below as to Legal Decision-Making, parenting time, support, and medical insurance/expenses do not include this child; the court reserves jurisdiction to address these issues regarding this child when the child is born.

b. CHILDREN. This Decree includes all minor children common to the parties as follows:

Name(s) Of Minor Child(ren)	**Date(s) of Birth(s)** (Month/Day/Yr)

c. CHILD LEGAL DECISION-MAKING. (Select one)

i. ☐ **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:

☐ **Parenting Time to the parent not having Legal Decision-Making**, according to the terms of the Parenting Plan attached as **"Exhibit B"** and made a part of this Decree. **OR**,

☐ **Supervised Parenting Time** to ☐ Petitioner **OR** ☐ Respondent according to the terms of the Parenting Plan attached as **"Exhibit B"**. Parenting Time may only take place in the presence of another person, named below or otherwise approved by the court.

Name of supervisor:

_____

Restrictions on parenting time:

_____

_____

_____

_____

The cost of supervised parenting time will be paid by:

☐ Petitioner **OR**

☐ Respondent **OR**
☐ Shared equally by the parties **OR**
☐ **No parenting time rights** to ☐ Petitioner OR ☐ Respondent. **OR**

ii. ☐ **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/Parenting Plan by the parties, signed by both parties and attached to this Decree as **"Exhibit B."**

The court adopts the terms of the Joint Legal Decision-Making Agreement/Parenting Plan describing the Legal Decision-Making and parenting time agreement between the parties. By attaching the Joint Legal Decision-Making Agreement/Parenting Plan to the Decree, the Agreement becomes part of the Decree and carries the same legal weight as the Decree.

d. 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 date this Decree is signed by the judge until further order of the court. Child Support is based on the information in the Parent's Worksheet for Child Support Amount attached hereto and incorporated by reference. All child support payments shall be made by wage assignment (if applicable) through the Support Payment Clearinghouse, and must include the statutory fee by the Order of Assignment signed this date. Payments will be in equal installments made on the 1st and 15th of each month.

e. MEDICAL, DENTAL, VISION CARE FOR MINOR CHILDREN.
(1) INSURANCE.

☐ **Petitioner** is responsible for providing: ☐ Medical ☐ Dental ☐ Vision Care Insurance
☐ **Respondent** is responsible for providing: ☐ Medical ☐ Dental ☐ Vision Care Insurance

Medical, dental, and vision care insurance, payments and expenses are based on the information in the Parent's Worksheet for Child Support attached and incorporated by reference. The party ordered to pay must keep the other party informed of the insurance company name, address and telephone number, and must give the other party the documents necessary to submit insurance claims.

(2) NON-COVERED EXPENSES.

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

4. SPOUSAL MAINTENANCE/SUPPORT.

a. ☐ **Neither party shall pay** spousal maintenance/support (alimony) to the other party, **OR**
b. ☐ **Petitioner OR** ☐**Respondent**
Is ordered to pay to the other party the sum of $_____ per month in spousal maintenance/support **BEGINNING THE FIRST DAY OF THE MONTH** after this Decree is signed. Each payment shall be made by the first day of each month after that and shall **continue until** ☐ the receiving party is remarried or deceased **OR** until (date) _____.

All payments shall be made through the Support Payment Clearinghouse by wage assignment, until all required payments have been made under this Decree.

Payments made shall be included in receiving spouse's taxable income and is tax deductible from the paying spouse's income as required by law. Spousal maintenance/support payments end if the receiving party is remarried or deceased.

c. In accordance with the parties' agreements,

☐ The spousal maintenance award **SHALL BE** modifiable in accordance with Arizona law, **OR**

☐ The spousal maintenance award **SHALL NOT** be modifiable for any reason.

5. PROPERTY, DEBTS AND TAX RETURNS. (Select any that apply.)

a. ☐ Petitioner is ordered to pay all debts unknown to Respondent, **AND**

☐ Respondent is ordered to pay all debts unknown to Petitioner, **AND**

☐ Each party is ordered to pay his or her debts from the following date, _____.

b. ☐ Each party is assigned his or her separate property and Petitioner must pay his/her separate debt, and Respondent must pay his/her separate debt.

c. ☐ This Decree can be used as a transfer of title and can be recorded. Parties shall sign all documents necessary to complete all transfer of title ordered in this Decree, such as motor vehicles, houses, and financial institution accounts. The parties shall transfer all real and personal property as described in **"Exhibit A"** to the other party on or before _____ by 5:00 p.m.

If the party required to transfer the property has not transferred the property to the party entitled to receive the property on or before the date and time listed above, the party entitled to receive the property is entitled upon application to a Writ of Assistance or Writ of Execution to be issued by the Clerk of the Court commanding the sheriff to put him or her in possession of the property.

Other orders and relief relating to property or debt, if any, are contained in **"Exhibit A"**, which is attached and incorporated into this Decree.

d. ☐ For previous calendar years, pursuant to IRS rules and regulations, the parties will file:

☐ Joint federal and state income tax returns and hold each other harmless from half of all income taxes and costs, if any, and each party will share equally in tax refunds, if any,

OR

☐ Separate federal and state income tax returns.

AND

☐ This calendar year and continuing thereafter, each party will file separate federal and state income tax returns.

AND

☐ Each party shall give the other party all necessary documentation to file all tax returns.

6. FINANCIAL INFORMATION EXCHANGES. In cases in which child support or spousal maintenance are ordered, then until such time as those would end under the orders in this Consent Decree, the parties shall exchange financial information (tax returns, spousal affidavits, earning statements and/or other related financial statements) every 24 months.

7. TAX EXEMPTION. The parties shall claim as income tax dependency exemptions on federal and state tax returns as follows. A party required to pay child support is only entitled to claim (a) minor child(ren) as an income tax dependency exemption if that parent has paid all of the child support due and owing for the year that party is entitled to the exemption:

☐ **DOES NOT APPLY. THERE ARE NO MINOR CHILDREN IN THIS MARRIAGE.**

Parent Entitled To Claim		Name of Child	Tax Year
☐ Petitioner	☐ Respondent	_____	_____
☐ Petitioner	☐ Respondent	_____	_____
☐ Petitioner	☐ Respondent	_____	_____
☐ Petitioner	☐ Respondent	_____	_____
☐ Petitioner	☐ Respondent	_____	_____

8. CHILDREN TO WHOM THIS DECREE DOES NOT APPLY.
It is ordered that ☐ Petitioner, **OR** ☐ Respondent has no legal obligation or right to the minor child(ren) born during the marriage but not common to the marriage. These minor children include: (Use additional paper if necessary)

Name: _____ Birth Date: _____
Name: _____ Birth Date: _____
Child expected to be born this date: _____

9. QUALIFIED DOMESTIC RELATIONS ORDER. (QDRO)
☐ A QDRO is not necessary;
☐ A QDRO is submitted herewith, **OR**
☐ A QDRO will be submitted to the court as soon as practicable or not later than _____
(DATE)
The court shall retain jurisdiction over the subject matter of the QDRO.

10. FINAL APPEALABLE ORDER. Pursuant to Rule 81, Arizona Rules of Family Law Procedure, this final judgment/decree is settled, approved and signed by the court and shall be entered by the clerk.

11. OTHER ORDERS. (List any other orders.)

_____
_____
_____
_____

_____ _____
Date **Judicial Officer**

CONSENT DECREE for

☐ **DISSOLUTION OF MARRIAGE (DIVORCE) or** ☐ **LEGAL SEPARATION**

☐ **WITH MINOR CHILDREN or** ☐ **WITHOUT MINOR CHILDREN**

APPROVED BY:

_____ _____

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)

<u>If You Are Filing A Consent Decree, The Respondent Must Sign:</u>

_____ _____

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)

<u>If Either Party Is Represented By An Attorney, The Attorney(s) Must Sign:</u>

Petitioner's Lawyer: _____ Date: _____

Respondent's Lawyer:: _____ Date: _____

CONSENT DECREE - ATTORNEY SIGNATURE(S) (if applicable)

If either party is represented by an attorney, the attorney(s) must also sign.

Petitioner's Attorney	Date
Respondent's Attorney	Date

If the Attorney General's Office (the "AG"), Division of Child Support Enforcement (DCSE) is involved in this case, a representative of that agency must approve the child support amount and sign below:

The approval of the AG's office as to child support provisions contained in this document is indicated by my signature below:

Signature of Attorney General / DCSE Representative	**Date**

EXHIBIT A: PROPERTY AND DEBTS (Refer to section "E" in instructions)

1. DIVISION OF COMMUNITY PROPERTY: (property acquired during the marriage)

☐ **Award each party the personal property in his/her possession.**

☐ **Community property is awarded to each party as follows:**

2. LIST OF COMMUNITY PROPERTY: (Be very specific in your description of the property.)

		AWARD TO	
Household Furniture and Appliances	(Be specific)	**Petitioner**	**Respondent**
_____		☐	☐
_____		☐	☐
_____		☐	☐
_____		☐	☐
_____		☐	☐
_____		☐	☐
_____		☐	☐
Video: TV / DVD / DVR / VCR, etc.	(Be specific)		
_____		☐	☐
_____		☐	☐
_____		☐	☐
_____		☐	☐
Audio: Stereo/ Radio (Household or Portable)	(Be specific)		
_____		☐	☐
_____		☐	☐
_____		☐	☐
Computers and Related Equipment	(Be specific)		
_____		☐	☐
_____		☐	☐
_____		☐	☐
Motor Vehicles	(Be specific)		
1. Year, Make, Model: _____		☐	☐
Last 4 digits of VIN # _____			
2. Year, Make, Model: _____		☐	☐
Last 4 digits of VIN # _____			
3. Year, Make, Model: _____		☐	☐
Last 4 digits of VIN # _____			

COMMUNITY PROPERTY: - continued (Be specific)	**AWARD TO**	
	Petitioner	**Respondent**
Cash, bonds of $ _____	☐	☐
Other: _____	☐	☐
Other: _____	☐	☐
Other: _____	☐	☐
Other: _____	☐	☐
Other: _____	☐	☐

☐ **Continued on attached page(s).**

3. DIVISION OF RETIREMENT, PENSION, DEFERRED COMPENSATION:

(WARNING. You should see a lawyer about your retirement, pension, deferred compensation, 401k plans and/or benefits. If you do not see a lawyer regarding these assets, you risk losing any interest you have in these plans and/or benefits. There are certain documents the plan administrator must have. Only a lawyer can help you prepare these documents.)

☐ Neither party has a retirement, pension, deferred compensation, 401K Plan and/or benefits.

OR

☐ Award each party his/her interest in any and all retirement benefits, pension plans, or other deferred compensation described as:

_____

OR

☐ Each party **WAIVES AND GIVES UP** his/her interest in any and all retirement benefits, pension plans, or other deferred compensation of the other party:

4. DIVISION OF REAL PROPERTY: (Land and Buildings) Section A is for one piece of property. Section B is for another, separate property.

A. Real property located at (address)

_____

_____

The ***legal description*** of this property, ***as quoted from the DEED to the property* is:***

_____

_____

_____

*** If you do not provide a correct legal description, you may have to come back to court** to amend the Decree to include the correct legal description.

The real property ("A") described above is awarded as the sole and separate property of:

☐ **Petitioner or** ☐ **Respondent OR**
☐ **Shall be sold and the proceeds divided as follows:**

_____% or $_____ To Petitioner.
_____% or $_____ To Respondent.

B. **Real property located at** (address)

_____

_____

The ***legal description*** of this property, ***as quoted from the DEED to the property* is:***

_____

_____

_____

*** If you do not provide a correct legal description, you may have to come back to court** to amend the Decree to include the correct legal description.

The real property ("B") described above is awarded as the sole and separate property of:

☐ **Petitioner or** ☐ **Respondent OR**
☐ **Shall be sold and the proceeds divided as follows:**

_____% or $_____ To Petitioner.
_____% or $_____ To Respondent.

☐ **Continues on attached page.**

5. **DIVISION OF COMMUNITY DEBT:** (Debts incurred during the marriage) (You should see a lawyer about how to divide secured and unsecured debts.)

Community debts shall be divided as follows:

Creditor Name	Amount Owed	Amount to be paid by Petitioner	Amount to be paid by Respondent
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$

☐ **Continued on attached page.**

6. ☐ Any debts or obligations incurred by either party before the date of separation, that are not identified in the list above or attached, shall be paid by the party who incurred the debt or obligation and that party shall indemnify and hold the other party harmless from such debts.

7. **SEPARATE PROPERTY:** (Property acquired before the marriage or by gift or bequest to one party.)

Property recognized as the separate property of the Petitioner or Respondent, is assigned below:

Description	Value	To Petitioner	To Respondent
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐

8. **SEPARATE DEBT:** (Debt acquired before the marriage.)

Debt recognized as the separate debt of the Petitioner or Respondent, is assigned below:

Creditor Name	Debt Amount	Petitioner Pays	Respondent Pays
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐
_____	$ _____	☐	☐

☐ **Continued on attached page.**

By signing this Exhibit and subscribing and swearing to same (or affirming to same) before a Notary Public, both parties affirm that the information is true and correct, including the following:

1. **NON-COVENANT MARRIAGE**. We do not have a covenant marriage.
2. **RIGHT TO TRIAL IS WAIVED.** I understand that by signing this Consent Decree, I am waiving my right to a trial before a judge.
3. **NO DURESS OR COERCION. COMPLETE AGREEMENT.** I am not under any force, threats, duress, coercion, or undue influence from anyone, including the other party, to sign this Consent Decree. This Decree with attachments, if any that I have signed is our full agreement. I have not agreed to something different from what is stated in writing in the Decree.
4. **LEGAL ADVICE.** I understand that even if I am representing myself without an attorney, I have the right to be represented by an attorney. I have the right to call an attorney and get legal advice before I sign this Consent Decree.
5. **IRRETRIEVABLY BROKEN MARRIAGE.** I agree that our marriage is irretrievably broken. There is no reasonable prospect of reconciliation *[or we desire to live separate and apart if this is a Legal Separation case].*
6. **DIVISION OF PROPERTY.** The agreement about division of property and debts is fair and equitable.

For Clerk Use Only

(1) Name of Person Filing: _____

Your Address: _____

Your City, State, Zip Code: _____

Your Telephone Number: _____

ATLAS Number (if applicable): _____

Attorney Bar Number (if applicable): _____

Representing: ☐ Self (Without an Attorney)

Or Attorney for ☐ Petitioner ☐ Respondent

SUPERIOR COURT OF ARIZONA
IN (2) _____COUNTY

(3)_____ Name of Petitioner	)	**(5)** Case No. _____
and	)	**(6)** ATLAS No. _____
(4)_____ Name of Respondent	)	**CHILD SUPPORT ORDER**

THE COURT FINDS that:

1. **(7)** _____, Father and
   (8) _____, Mother, owe a duty to support the following child(ren):

Name	Date of Birth
(9) _____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. **Child Support Guidelines.**
   The required financial factors and any discretionary adjustments pursuant to the Arizona Child Support Guidelines are as set forth in the Parent's Worksheet for Child Support, attached and incorporated herein by reference.

3. **Child Support.**
(10a) [ ] Father [ ] Mother is obligated to pay child support to [ ] Father [ ] Mother in the amount of $_____ per month pursuant to the Arizona Child Support Guidelines without deviation.

(10b) [ ] Father [ ] Mother is obligated to pay child support to [ ] Father [ ] Mother in the amount of $_____ per month pursuant to the Arizona Child Support Guidelines without deviation. This amount is an appropriate amount to award for child support in this case except that the Court finds it more appropriate and just to make a rounding adjustment to the exact guideline amount for ease of calculation to $_____ per month.

(11a) [ ] Father [ ] Mother is obligated to pay child support to [ ] Father [ ] Mother in the amount of $_____ per month pursuant to the Arizona Child Support Guidelines. Application of the child support guidelines in this case is inappropriate or unjust. The Court has considered the best interests of the child in determining that a deviation is appropriate. After deviation the child support order is $_____ per month.

(11b) [ ] Father [ ] Mother is obligated to pay child support to [ ] Father [ ] Mother in the amount of $_____ per month pursuant to the Arizona Child Support Guidelines. Application of the child support guidelines in this case is inappropriate or unjust. The Court has considered the best interests of the child in determining that a deviation is appropriate. After deviation the child support order is $_____ per month. Further, the parties have entered into a written agreement or their agreement is on the record and is free of duress and coercion with knowledge of the amount of child support that would have been ordered under the guidelines but for the agreement.

Fill in the reason(s) for deviation below if (11a) or (11b) was selected.

_____

_____

_____

4. **Support Arrears.**
(12a) [ ] Father [ ] Mother owes child support arrearages to [ ] Father [ ] Mother in the total amount of $_____ for the time period of _____ thru _____ plus accrued interest on prior child support arrearages due of $_____ calculated thru the date of _____.

(12b) [ ] The court finds no child support arrearages due and owing.

(12c) [ ] No evidence was presented in support of child support arrearages.

5. **Past Support.**
(13a) [ ] It is appropriate to award [ ] Father [ ] Mother an additional judgment for past support in the amount of $_____ for the period between the filing of this current petition and the date current child support is ordered to begin.

(13b) [ ] It is appropriate to award [ ] Father [ ] Mother an additional judgment in the amount of $_____ for past support owed from the date of separation, but not more than three years before the date of filing the current petition.

(13c) [ ] The court finds no past support amount due and owing.

(13d) [ ] No evidence was presented in support of past child support.

IT IS ORDERED that:

A. **Child Support.**
(14) [ ] Father [ ] Mother shall pay child support to [ ] Father [ ] Mother in the sum of $_____ per month payable by wage assignment on the first day of each month commencing _____.

B. **Support Arrearages Judgment.**
(15a) [ ] Father [ ] Mother is granted judgment against [ ] Father [ ] Mother in the sum of $_____ as and for child support arrearages for the period of _____ thru the date of _____ together with interest on said sum at the legal rate of 10% per annum until paid in full plus additional accrued interest on prior child support judgments of $_____ calculated thru the date of _____. [ ] Father [ ] Mother shall pay, in addition to [ ] his [ ] her current support payment, the sum of $_____ per month toward this judgment, payable on the first day of each month commencing _____ until paid in full.

(15b) [ ] No judgment for child support arrearages is entered.

C. **Past Support Judgment.**
(16a) [ ] Father [ ] Mother is granted a past support judgment against [ ] Father [ ] Mother in the additional amount of $_____. [ ] Father [ ] Mother shall pay the additional amount of $_____ per month toward this judgment, payable on the first day of each month commencing _____ until paid in full.

(16b) [ ] No judgment for past support is entered.

D. **Payments and Clearinghouse.**
All payments, plus the statutory handling fee, shall be made through the Support Payment Clearinghouse pursuant to an Order of Assignment or Income Withholding Order signed this date. Any time the full amount of support ordered is not withheld, the obligor remains responsible for the full monthly amount ordered. Payments not made directly through the Support Payment Clearinghouse shall be considered *gifts* unless otherwise ordered. All payments shall be made payable to and mailed directly to:

Support Payment Clearinghouse
PO Box 52107
Phoenix, AZ 85072-2107

(17) Payments <u>must</u> include the [ ] Father's [ ] Mother's name and ATLAS number. Pursuant to A.R.S. § 25-322, the parties shall submit current address information in writing to the Clerk of the Superior Court and the Support Payment Clearinghouse immediately. The obligor shall submit the names and addresses of their employers or

other payors within 10 days. The parties shall submit address changes within 10 days of the change.

E. **Total Monthly Payments.**

(18) [ ] Father [ ] Mother shall make total monthly payments to [ ] Father [ ] Mother of $_____ per month payable on the first day of each month commencing _____ as follows:

Monthly Payments:	Current child support payment as ordered above:	$ _____
	Child support arrearage payments:	$ _____
	Current spousal maintenance payment:	$ _____
	Past due spousal maintenance payment:	$ _____
	Clearinghouse handling fee:	$ 5.00
	Total monthly payment:	**$** _____

F. **Non-Covered Medical Expenses.**
(19) [ ] Father [ ] Mother is ordered to pay _____% and [ ] Father [ ] Mother is ordered to pay _____% of all reasonable uncovered and/or uninsured medical, dental, vision, prescription and other health care charges for the minor child(ren). A request for payment or reimbursement of uninsured medical, dental and/or vision costs must be provided to the other parent within 180 days after the date the services occur. The parent responsible for payment or reimbursement must pay their share, as ordered by the court, or make acceptable payment arrangements with the provider or person entitled to reimbursement within 45 days after receipt of the request.

G. **Medical, Dental, and Vision Insurance (A.R.S. § 25-320(J)).**
(20a) [ ] Father [ ] Mother shall be individually responsible for providing medical insurance for the minor child(ren) and shall continue to pay premiums for any medical, dental and vision policies covering the child(ren) that are currently included in the incorporated guidelines worksheet.

(20b) [ ] Father [ ] Mother shall be individually responsible for providing medical insurance for the minor child(ren) of the parties as soon as it becomes accessible and available at a reasonable cost, as neither parent currently has the ability to obtain such medical insurance.

Medical, dental, and vision insurance, payments and expenses are based on the information in the Parent's Worksheet for Child Support attached hereto and incorporated by reference. The parent ordered to pay must keep the other party informed of the insurance company name, address and telephone number, and must give the other party the documents necessary to submit insurance claims. An insurance card must be provided to the other parent. Notification must also be provided to the other parent if coverage is no longer being provided for the child(ren).

H. **Travel Expenses.**
(21) The costs of travel related to parenting time over 100 miles away shall be shared as follows:

Father _____% Mother _____%

(22) Other Findings and Orders.

_____

_____

_____

_____

I. **Information Exchange.**
The parties shall exchange financial information such as copies of tax returns, financial affidavits, and earnings statements every twenty-four months. At the time the parties exchange financial information, they shall also exchange residential addresses and the names and addresses of their employers unless the court has ordered otherwise.

J. **(23) Tax Exemptions.**
The Court allocates tax exemptions for the dependent children as follows:

Child's Name	**Date of Birth** (Month, Day, Year)	**Parent Entitled to Deduction**	**For Calendar Year**
		[ ] Mother [ ] Father	
		[ ] Mother [ ] Father	
		[ ] Mother [ ] Father	
		[ ] Mother [ ] Father	
		[ ] Mother [ ] Father	
		[ ] Mother [ ] Father	

For any years following those listed above while the Child Support Order remains in effect, the parties shall repeat the above pattern of claiming deductions for each child.

(23a) [ ] Father [ ] Mother may claim the allocated tax exemptions only if all child support and arrears ordered for the year have been paid by December 31 of that year.

(23b) [ ] Father [ ] Mother may unconditionally claim the tax exemptions allocated to [ ] him [ ] her for income tax purposes.

K. **Modification.**
If this is a modification of child support, all other prior orders of this Court not modified remain in full force and effect.

L. **Emancipation.**
Although the obligation to pay support may continue, a child is emancipated:

- On the child's 18th birthday. (However if a child is still attending high school or a certified high school equivalency program, support will continue but only until the child graduates or reaches 19 years of age.)
- On the date of the child's marriage.
- When the child is adopted.
- When the child dies.

_____ _____
Date Judicial Officer

_____
Printed Name of Judicial Officer

STIPULATION

(24) SIGNATURE BY PETITIONER AND RESPONDENT:
By signing this document, we state to the Court, under penalty of perjury, that we have read and agree to this Order and that all the information contained in it is true, correct and complete to the best of our knowledge and belief.

_____ _____
Obligor Date Obligee Date

_____ _____
Attorney for Obligor Date Attorney for Obligee Date

Revised 11.25.15

INCOME WITHHOLDING FOR SUPPORT

PINAL COUNTY

INSTRUCTIONS AND FORMS

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

INCOME WITHHOLDING FOR SUPPORT - Instructions

The Income Withholding for Support (IWO) is the OMB-approved form used for income withholding in tribal, intrastate, and interstate cases as well as all child support orders initially issued in the state on or after January 1, 1994, and all child support orders initially issued (or modified) in the state before January 1, 1994 if arrearages occur. This form is the standard format prescribed by the Secretary in accordance with 42 USC §666(b)(6)(A)(ii). Except as noted, the following information is required and must be included.

Please note:

- For the purpose of this IWO form and these instructions, "state" is defined as a state or territory.
- Do's and don'ts on using this form are found at www.acf.hhs.gov/programs/css/resource/using-the-income-withholding-for-support-form-dos-and-donts.

COMPLETED BY SENDER:

1a. **Original Income Withholding Order/Notice for Support (IWO).** Check the box if this is an initial or original IWO.

1b. **Amended IWO.** Check the box to indicate that this form amends a previous IWO. Any changes to an IWO must be done through an amended IWO.

1c. **One-Time Order/Notice For Lump Sum Payment.** Check the box when this IWO is to attach a one-time collection of a lump sum payment. When this box is checked, enter the amount in field 14, Lump Sum Payment, in the *Amounts to Withhold* section. Additional IWOs must be issued to collect subsequent lump sum payments.

1d. **Termination of IWO.** Check the box to stop income withholding on a child support order. Complete all applicable identifying information to aid the employer/income withholder in terminating the correct IWO.

1e. **Date.** Date this form is completed and/or signed.

1f. **Child Support Enforcement (CSE) Agency, Court, Attorney, Private Individual/Entity (Check One).** Check the appropriate box to indicate which entity is sending the IWO. If this IWO is **not** completed by a state or tribal CSE agency, the sender should contact the CSE agency (see www.acf.hhs.gov/programs/css/resource/state-income-withholding-contacts-and-program-information) to determine if the CSE agency needs a copy of this form to facilitate payment processing.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

This IWO must be regular on its face. The IWO must be rejected and returned to sender under the following circumstances:

- IWO instructs the employer/income withholder to send a payment to an entity other than a state disbursement unit (for example, payable to the custodial party, court, or attorney). Each state is required to operate a state disbursement unit (SDU), which is a centralized facility for collection and disbursement of child support payments. Exception: If this IWO is issued by a court, attorney, or private individual/entity and the initial child support order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, the employer/income withholder must follow the payment instructions on the form.
- Form does not contain all information necessary for the employer to comply with the withholding.
- Form is altered or contains invalid information.
- Amount to withhold is not a dollar amount.
- Sender has not used the OMB-approved form for the IWO.
- A copy of the underlying order is required and not included.

If you receive this document from an attorney or private individual/entity, a copy of the underlying order containing a provision authorizing income withholding must be attached.

COMPLETED BY SENDER:

1g. **State/Tribe/Territory**. Name of state or tribe sending this form. This must be a governmental entity of the state or a tribal organization authorized by a tribal government to operate a CSE program. If you are a tribe submitting this form on behalf of another tribe, complete line 1i.

1h. **Remittance ID (include w/payment).** Identifier that employers must include when sending payments for this IWO. The Remittance ID is entered as the case identifier on the electronic funds transfer/electronic data interchange (EFT/EDI) record.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

The employer/income withholder must use the Remittance ID when remitting payments so the SDU or tribe can identify and apply the payment correctly. The Remittance ID is entered as the case identifier on the EFT/EDI record.

COMPLETED BY SENDER:

1i. **City/County/Dist./Tribe.** Name of the city, county, or district sending this form. This must be a government entity of the state or the name of the tribe authorized by a tribal government to operate a CSE program for which this form is being sent. (A tribe should leave this field blank unless submitting this form on behalf of another tribe.)

1j. **Order ID.** Unique identifier associated with a specific child support obligation. It could be a court case number, docket number, or other identifier designated by the sender.

1k. **Private Individual/Entity.** Name of the private individual/entity or non-IV-D tribal CSE organization sending this form.

1l. **CSE Agency Case ID.** Unique identifier assigned to a state or tribal CSE case. In a state IV-D case as defined at 45 Code of Federal Regulations (CFR) 305.1, this is the identifier reported to the Federal Case Registry (FCR). One IWO must be issued for each IV-D case and must use the unique CSE Agency Case ID. For tribes, this would be either the FCR identifier or other applicable identifier.

Fields 2 and 3 refer to the employee/obligor's employer/income withholder and specific case information.

2a. **Employer/Income Withholder's Name.** Name of employer or income withholder.

2b. **Employer/Income Withholder's Address.** Employer/income withholder's mailing address including street/PO box, city, state, and zip code. (This may differ from the employee/obligor's work site.) If the employer/income withholder is a federal government agency, the IWO should be sent to the address listed under Federal Agency Income Withholding Contacts and Program Information at www.acf.hhs.gov/programs/css/resource/federal-agency-income-withholding-contact-information.

2c. **Employer/Income Withholder's FEIN.** Employer/income withholder's nine-digit Federal Employer Identification Number (if available).

3a. **Employee/Obligor's Name.** Employee/obligor's last name, first name, middle name.

3b. **Employee/Obligor's Social Security Number.** Employee/obligor's Social Security number or

other taxpayer identification number.

3c. **Custodial Party/Obligee's Name.** Custodial party/obligee's last name, first name, middle name. Enter one custodial party/obligee's name on each IWO form. Multiple custodial parties/obligees are not to be entered on a single IWO. Issue one IWO per state IV-D case as defined at 45 CFR 305.1

3d. **Child(ren)'s Name(s).** Child(ren)'s last name(s), first name(s), middle name(s). (Note: If there are more than six children for this IWO, list additional children's names and birth dates in field 33 - Supplemental Information). Enter the child(ren) associated with the custodial party/obligee and employee/obligor only. Child(ren) of multiple custodial parties/obligees is not to be entered on an IWO.

3e. **Child(ren)'s Birth Date(s).** Date of birth for each child named.

3f. **Blank box.** Space for court stamps, bar codes, or other information.

ORDER INFORMATION – Field 4 identifies which state or tribe issued the order. Fields 5 through 12 identify the dollar amount to withhold for a specific kind of support (taken directly from the support order) for a specific time period.

4. **State/Tribe.** Name of the state or tribe that issued the order.

5a-b. **Current Child Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.

6a-b. **Past-due Child Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.

6c. **Arrears Greater Than 12 Weeks?** The appropriate box (Yes/No) must be checked indicating whether arrears are greater than 12 weeks so the employer/income withholder can determine the withholding limit.

7a-b. **Current Cash Medical Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.

8a-b. **Past-due Cash Medical Support.** Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.

9a-b. **Current Spousal Support.** (Alimony) Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.

10a-b. **Past-due Spousal Support.** (Alimony) Dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order.

11a-c. **Other.** Miscellaneous obligations dollar amount to be withheld **per** the time period (for example, week, month) specified in the underlying order. **Must specify** a description of the obligation (for example, court fees).

12a-b. **Total Amount to Withhold.** The total amount of the deductions **per** the corresponding time period. Fields 5a, 6a, 7a, 8a, 9a, 10a, and 11a should total the amount in 12a.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

An acceptable method of determining the amount to be paid on a weekly or biweekly basis is to multiply the monthly amount due by 12 and divide that result by the number of pay periods in a year.

AMOUNTS TO WITHHOLD - Fields 13a through 13d specify the dollar amount to be withheld for this IWO if the employer/income withholder's pay cycle does not correspond with field 12b.

13a. **Per Weekly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid weekly.

13b. **Per Semimonthly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid twice a month.

13c. **Per Biweekly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid every two weeks.

13d. **Per Monthly Pay Period.** Total amount an employer/income withholder should withhold if the employee/obligor is paid once a month.

14. **Lump Sum Payment.** Dollar amount withheld when the IWO is used to attach a lump sum payment. This field should be used when field 1c is checked.

REMITTANCE INFORMATION - Payments are forwarded to the SDU in each state, unless the order was issued by a tribal CSE agency. If the order was issued by a tribal CSE agency, the employer/income withholder must follow the remittance instructions on the form.

15. **State/Tribe.** Name of the state or tribe sending this document.

16. **Days.** Number of days after the effective date noted in field 17 in which withholding must begin according to the state or tribal laws/procedures for the employee/obligor's principal place of employment.

17. **Date.** Effective date of this IWO.

18. **Working Days.** Number of working days within which an employer/income withholder must remit amounts withheld pursuant to the state or tribal laws/procedures of the principal place of employment.

19. **% of Disposable Income.** The percentage of disposable income that may be withheld from the employee/obligor's paycheck.

NOTE TO EMPLOYER/INCOME WITHHOLDER:

For state orders, the employer/income withholder may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (15 USC §1673(b)); or 2) the amounts allowed by the state of the employee/obligor's principal place of employment.

For tribal orders, the employer/income withholder may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers/income withholders who receive a state order, the employer/income withholder may not withhold more than the limit set by the law of the jurisdiction in which the employer/income withholder is located or the maximum amount permitted under section 303 (b) of the Federal Consumer Credit Protection Act (15 USC §1673(b)).

A federal government agency may withhold from a variety of incomes and forms of payment, including voluntary separation incentive payments (buy-out payments), incentive pay, and cash awards. For a more complete list, see 5 CFR 581.103.

COMPLETED BY SENDER:

20. **State/Tribe.** Name of the state or tribe sending this document.

21. **Document Tracking ID.** Optional unique identifier for this form assigned by the sender.

Please Note: Employer's Name, FEIN, Employee/Obligor's Name and SSN, Remittance ID, CSE Agency Case ID, and Order ID must appear in the header on pages two and subsequent pages.

22. **FIPS Code.** Federal Information Processing Standards code.

23. **SDU/Tribal Order Payee.** Name of SDU (or payee specified in the underlying tribal support order) to which payments must be sent. Federal law requires payments made by IWO to be sent to the SDU except for payments in which the initial child support order was entered before January 1, 1994 or payments in tribal CSE orders.

24. **SDU/Tribal Payee Address.** Address of the SDU (or payee specified in the underlying tribal support order) to which payments must be sent. Federal law requires payments made by IWO to be sent to the SDU except for payments in which the initial child support order was entered before January 1, 1994 or payments in tribal CSE orders.

COMPLETED BY EMPLOYER/INCOME WITHHOLDER:

25. **Return to Sender Checkbox.** The employer/income withholder should check this box and return the IWO to the sender if this IWO is not payable to an SDU or tribal payee or this IWO is not regular on its face. Federal law requires payments made by IWO to be sent to the SDU except for payments in which the initial child support order was entered before January 1, 1994 or payments in tribal CSE orders.

COMPLETED BY SENDER:

26. **Signature of Judge/Issuing Official.** Signature (if required by state or tribal law) of the official authorizing this IWO.

27. **Print Name of Judge/Issuing Official.** Name of the official authorizing this IWO.

28. **Title of Judge/Issuing Official.** Title of the official authorizing this IWO.

29. **Date of Signature.** Optional date the judge/issuing official signs this IWO.

30. **Copy of IWO checkbox.** Check this box for all intergovernmental IWOs. If checked, the employer/income withholder is required to provide a copy of the IWO to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

The following fields refer to federal, state, or tribal laws that apply to issuing an IWO to an employer/income withholder. State- or tribal-specific information may be included only in the fields below.

COMPLETED BY SENDER:

31. **Liability.** Additional information on the penalty and/or citation of the penalty for an employer/income withholder who fails to comply with the IWO. The state or tribal law/procedures of the employee/obligor's principal place of employment govern the penalty.

32. **Anti-discrimination**. Additional information on the penalty and/or citation of the penalty for an employer/income withholder who discharges, refuses to employ, or disciplines an

employee/obligor as a result of the IWO. The state or tribal law/procedures of the employee/obligor's principal place of employment govern the penalty.

33. **Supplemental Information**. Any state-specific information needed, such as maximum withholding percentage for non-employees, fees the employer/income withholder may charge the obligor for income withholding, or children's names and DOBs if there are more than six children on this IWO. Additional information must be consistent with the requirements of the form and the instructions.

COMPLETED BY EMPLOYER/INCOME WITHHOLDER:

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS

The employer must complete this section when the employee/obligor's employment is terminated, income withholding ceases, or if the employee/obligor has never worked for the employer.

34a-b. **Employment/Income Status Checkbox.** Check the employment/income status of the employee/obligor.

35. **Termination Date.** If applicable, date employee/obligor was terminated.

36. **Last Known Phone Number.** Last known (home/cell/other) phone number of the employee/obligor.

37. **Last Known Address.** Last known home/mailing address of the employee/obligor.

38. **Final Payment Date.** Date employer sent final payment to SDU/tribal payee.

39. **Final Payment Amount.** Amount of final payment sent to SDU/tribal payee.

40. **New Employer's Name.** Name of employee's/obligor's new employer (if known).

41. **New Employer's Address.** Address of employee's/obligor's new employer (if known).

COMPLETED BY SENDER:

CONTACT INFORMATION

42. **Issuer Name (Employer/Income Withholder Contact).** Name of the contact person that the employer/income withholder can call for information regarding this IWO.

43. **Issuer Phone Number.** Phone number of the contact person.

44. **Issuer Fax Number.** Fax number of the contact person.

45. **Issuer E-mail/Website.** E-mail or website of the contact person.

46. **Termination/Income Status and Correspondence Address.** Address to which the employer should return the Employment Termination or Income Status notice. It is also the address that the employer should use to correspond with the issuing entity.

47. **Issuer Name (Employee/Obligor Contact).** Name of the contact person that the employee/obligor can call for information.

48. **Issuer Phone Number.** Phone number of the contact person.

49. **Issuer Fax Number.** Fax number of the contact person.

50. **Issuer E-mail/Website.** E-mail or website of the contact person.

The Paperwork Reduction Act of 1995

This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average 5 minutes per response for Non-IV-D CPs; 2 minutes per response for employers; 3 seconds for e-IWO employers, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

INCOME WITHHOLDING FOR SUPPORT

☐ **ORIGINAL INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)**
☐ **AMENDED IWO**
☐ **ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT**
☐ **TERMINATION OF IWO** **Date:** _____

☐ Child Support Enforcement (CSE) Agency ☐ Court ☐ Attorney ☐ Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions **www.acf.hhs.gov/programs/css/resource/income-withholding-for-support-instructions**). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying order must be attached.

State/Tribe/Territory **Arizona**
City/County/Dist./Tribe _____
Private Individual/Entity _____

Remittance ID (include w/payment) _____
Order ID _____
CSE Agency Case ID _____

_____
Employer/Income Withholder's Name

_____
Employer/Income Withholder's Address

_____

_____

RE: _____
Employee/Obligor's Name (Last, First, Middle)

_____
Employee/Obligor's Social Security Number

_____
Custodial Party/Obligee's Name (Last, First, Middle)

Employer/Income Withholder's FEIN _____

Child(ren)'s Name(s) (Last, First, Middle)	Child(ren)'s Birth Date(s)

ORDER INFORMATION: This document is based on the support or withholding order from **Arizona** (State/Tribe). You are required by law to deduct these amounts from the employee/obligor's income until further notice.

$ _____ Per Month current child support
$ _____ Per Month past-due child support - **Arrears greater than 12 weeks?** ☐ Yes ☐ No
$ _____ Per Month current cash medical support
$ _____ Per Month past-due cash medical support
$ _____ Per Month current spousal support
$ _____ Per Month past-due spousal support
$ _____ Per **Month** other (must specify) **Clearinghouse Fee.**

for a **Total Amount to Withhold** of **$ 0.00** per **Month**.

AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

$ 0.00 per weekly pay period
$ 0.00 per biweekly pay period (every two weeks)
$ _____ **Lump Sum Payment:** Do not stop any existing IWO unless you receive a termination order.
$ 0.00 per semimonthly pay period (twice a month)
$ 0.00 per monthly pay period

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
CSE Agency Case Identifier: _____ Order Identifier: _____

REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is Arizona (State/Tribe), you must begin withholding no later than the first pay period that occurs fourteen (14) days after the date of receipt of this Order. Send payment within two (2) working days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold up to fifty percent (50%) of disposable income. If the obligor is a non-employee, obtain withholding limits from Supplemental Information on page 3. If the employee/obligor's principal place of employment is not Arizona (State/Tribe), obtain withholding limitations, time requirements, and any allowable employer fees at www.acf.hhs.gov/programs/css/resource/state-income-withholding-contacts-and-program-information for the employee/obligor's principal place of employment.

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit (SDU)), see www.acf.hhs.gov/programs/css/employers/electronic-payments.

Include the ***Remittance ID*** **with the payment** and if necessary this FIPS code: _____.

Remit payment to **Support Payment Clearinghouse** (SDU/Tribal Order Payee)
at **P.O. Box 52107, Phoenix, AZ 85072-2107** (SDU/Tribal Payee Address)

☐ **Return to Sender [Completed by Employer/Income Withholder]**. Payment must be directed to an SDU in accordance with 42 USC §666(b)(5) and (b)(6) or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

Signature of Judge/Issuing Official (if Required by State or Tribal Law): _____
Print Name of Judge/Issuing Official: _____
Title of Judge/Issuing Official: _____
Date of Signature: _____

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.
☒ If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at www.acf.hhs.gov/programs/css/resource/state-income-withholding-contacts-and-program-information.

Priority: Withholding for support has priority over any other legal process under State law against the same income (42 USC §666(b)(7)). If a federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments To SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a court, attorney, or private individual/entity and the initial order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the state (or tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the state or tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
CSE Agency Case Identifier: _____ Order Identifier: _____

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) (15 USC §1673(b)); or 2) the amounts allowed by the state of the employee/obligor's principal place of employment or tribal law if a tribal order (see *Remittance Information*). Disposable income is the net income after mandatory deductions such as: state, federal, local taxes; Social Security taxes; statutory pension contributions; and Medicare taxes. The federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% --to 55% and 65% --if the arrears are greater than 12 weeks. If permitted by the state or tribe, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers/income withholders who receive a state IWO, you may not withhold more than the limit set by tribal law.

Depending upon applicable state or tribal law, you may need to consider amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Arrears greater than 12 weeks? If the *Order Information* does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

Supplemental Information:

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
CSE Agency Case Identifier: _____ Order Identifier: _____

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the contact information below:

☐ This person has never worked for this employer nor received periodic income.

☐ This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known phone number: _____

Last known address: _____

_____

Final payment date to SDU/tribal payee: _____ Final payment amount: _____

New employer's name: _____

New employer's address: _____

_____

CONTACT INFORMATION:

To Employer/Income Withholder: If you have questions, contact Clerk of the Superior Court Office (issuer name) by phone: (520) 866-5321, by fax: (520) 866-5377, by e-mail or website: customerservice@pinalcountyaz.gov.

Send termination/income status notice and other correspondence to:
PO Box 628, Florence AZ 85132 (issuer address).

To Employee/Obligor: If the employee/obligor has questions, contact Clerk of the Superior Court Office (issuer name) by phone: (520) 866-5321, by fax: (520) 866-5377, by e-mail or website: customerservice@pinalcountyaz.gov.

The Paperwork Reduction Act of 1995
This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average 5 minutes per response for Non-IV-D CPs; 2 minutes per response for employers; 3 seconds for e-IWO employers, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Income Withholding Order Information Page

This order is effective _____. All rules on page 2 under REMITTANCE INFORMATION apply after the effective date.

Presumptive Termination Date:

This order is presumed to terminate on the presumptive termination date _____ when the youngest child who is subject to this order is expected to emancipate as defined in A.R.S. §§ 25-320 and 25-501 unless the order contains a payment on arrears. The presumptive termination date of this order may be modified by the court upon changed circumstances.

Note to Employers/Other Withholders:

If the most recent Income Withholding Order in the case is for current child support only, you should discontinue withholding monies after the last pay period of the month of the presumptive termination date above. If the Income Withholding Order includes current child support and an arrearage payment, you should continue withholding the entire amount listed on the order until further notice.

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 CONACT 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: _____