

REQUEST TO ENFORCE COURT ORDERED SUPPORT



PINAL COUNTY

**To Enforce an Existing Court Order Re: Child Support / Spousal
Support / Medical Expenses**

INSTRUCTIONS AND FORMS

**Provided as a Public Service by
REBECCA PADILLA
Clerk of the Superior Court**

INSTRUCTIONS FOR COMPLETING REQUEST TO ENFORCE SUPPORT

“Obligor” is the person ordered to make support or expense payments.

“Obligee” is the person or agency entitled to receive such payments.

COMPLETE THIS FORM TO REQUEST ENFORCEMENT OF CHILD SUPPORT, SPOUSAL MAINTENANCE OR MEDICAL EXPENSES IF:

- You have an Arizona order that requires the payment of child support, spousal maintenance or medical expenses.
- The party obligated to pay support or medical, dental and vision expenses has failed to make the payments due to you.

NOTE: These forms cannot be used if an Arizona court did not enter your support order. Out-of-state orders may be enforced in Arizona if you follow certain specified procedures required to enforce foreign order. In such cases, you may wish to contact an attorney regarding enforcement.

TO COMPLETE AND FILE THIS REQUEST TO ENFORCE YOU WILL NEED:

- Information from the Order(s) you wish to have enforced.
- Copies of your current payment history from the Clerk of the Court in all countries where payments were made during the time frame specified in Item 12. If payments were made in another state during the time, those payment histories will also be necessary.

FOLLOW THESE INSTRUCTIONS NUMBERED TO MATCH THE IDENTIFYING NUMBERS ON THE REQUEST TO ENFORCE FORM. TYPE OR PRINT NEATLY USING BLACK INK.

- (1) Fill in your name, address and telephone number as the person who is requesting enforcement of the order that was established terms of court-ordered legal decision-making or parenting time. (An attorney must also list the name of the person represented and the attorney's State Bar Number).
- (2) Fill in the name of the county in which the request is being filed. This may already be printed on the form.
- (3) Fill in the name of the person who is shown as the petitioner on the court order that established the support or medical expense obligation.
- (4) Fill in the name of the person who is shown as the respondent on the document you are using for item 3.
- (5) If the order you are asking to have enforced was issued in the same county in which you are filing this request, fill in the case number of that order. Otherwise leave this blank.
- (6) Mark the “Child Support” box if you are seeking to enforce a child support order; mark the “Spousal” box if you are seeking to enforce the terms of a spousal maintenance / support; mark the “Medical Support” box if you are seeking to enforce reimbursement of medical expenses ordered.
- (7) Fill in the date of the order you want to have enforced.
- (8) Fill in the name of the Obligor, person who owes you support.
- (9) Fill in the name of the judicial officer who signed the order of support.

(10) Fill in the amount of support to be paid and when it was to be paid. (EXAMPLE: Child Support of \$300 per month due on the 1st day of each month or Mother / Father was ordered to pay (percentage) of medical expenses not paid by insurance.

(11) Fill in the **total** amount of support that is past due and owed to you. This amount can be determined by first calculating the total amount that should have been paid during the time period stated in Item 12. (EXAMPLE: 9 months X \$350 per month = \$3150.00). Next, calculate the total amount of support you received during this time period. Now, subtract the total amount paid from the total amount due. This is the principal amount of the arrearage; it does not include the amount of interest to which you are entitled.

For medical reimbursement - provide verification (billing statement) of expenses not paid by insurance and balance owed by parent not abiding by court order.

(12) Fill in the time period over which you claim the past-due support or expense was not paid.

(13) If you wish the court to take any action other than that which is requested in lines 3(A) through 3(F), state on this line what action you want the court to take.

(14) Sign your name on the signature line before a Notary Public or Clerk of Court to affirm that the information on the form is true and correct to the best of your knowledge and belief.

COMPLETE THE ORDER TO APPEAR (Enforcement of Support):

(1) Fill in your name, address and telephone number as the person who is requesting enforcement of the order that was established terms of court-ordered legal decision-making or parenting time. (An attorney must also list the name of the person represented and the attorney's State Bar Number).

(2) Fill in the name of the county in which the request is being filed. This may already be printed on the form.

(3) Fill in the name of the person who is shown as the petitioner on the court order that established the support or medical expense obligation.

(4) Fill in the name of the person who is shown as the respondent on the document you are using for item 3.

(5) Fill in the case number shown on the document you are using for item 3.

(6) Fill in the name and address of the person whom you believe violated the order.

ACCEPTANCE OF SERVICE FORM:

- Complete the name of the Petitioner, the name of the Respondent and case number. Do not continue further. The rest must be completed by the other party who accepts service. See ***Instructions after Receiving an Order to Appear*** provided in this packet.

COPIES: Once you have completed all the initial forms, have your signature notarized on each document that required a notarized signature. Make **2 copies** of all the completed forms.

NOTE: The Clerk's office charges \$0.50 per page for copies.

Assemble the copies so that you have **3 packets** -- the originals and 2 sets of copies.

Include with the set of copies a SELF ADDRESSED STAMPED ENVELOPE so when the Order to Appear is completed by the Court; copies of the Order to Appear will be mailed you to complete legal services on the other party.

PROCEDURES

MAKE COPIES: After you have completed the Request, had your signature notarized, completed the Order to Appear and Acceptance of Service: make copies depending on your case and how many parties need to be served. Separate your papers into three sets* (4, if DES or Dept of Child Support Enforcement is involved)

Set 1 – ORIGINALS to file with the Clerk of Superior Court: (1) Request to Enforce Support (2) Order to Appear	Set 2 – COPY for the Other Party (1) "Request to Enforce Support" (2) "Order to Appear"
Set 3 – COPY for You (1) "Request to Enforce Support" (2) "Order to Appear"	Set 4 – COPY for State (*if required) (1) "Request to Enforce Support" (2) "Order to Appear" (3) "Acceptance of Service"

FILE THE PAPERS WITH THE CLERK OF THE COURT.

Visit our website for office locations or feel free to give us a call.

Contact Information for all Offices

Toll Free: 888.431.1311 • Local: 520.509.3555 or 311 • Fax: 520.866.5320

www.coscpinalcountyaz.gov/office.html

FILING FEE: There is a filing fee for filing this Request and there may be other charges associated with this process. Inquire with the Clerk's office regarding the filing fee amount. The fee is payable to the Clerk of the Superior Court by money order, personal check with proper identification, Cash, Visa, Master card, debit or credit.

Go online to <http://www.coscpinalcountyaz.gov/fees.html> for current filing fees.

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. With the Application for Deferral, you must provide proof of income (copy of your last 2 most recently paystubs).

Hand the originals and all set of copies to the clerk at the filing counter and along with your method of payment. The clerk will fill in the date, time and place of the hearing on the Order to Appear (Enforcement of Support). The clerk will date and sign the Order to Appear. The clerk will return the stamped copies to you. The stamped copies are called "conformed" copies.

MAKE SURE YOU GET BACK FROM THE DEPUTY CLERK THE FOLLOWING:

- Your conform copy
- The other party's stamped copy
- The copy for DES / Dept of Child Support Enforcement (if required)

SERVE THE PAPERS ON THE OTHER PARTY(IES). The copy of the Request to Enforce Support may be delivered by the Sheriff's Office, a licensed process server, commercial delivery service or mail by which you can obtain an original or copy of the other party's signature confirming delivery, or by an notarized **Acceptance of Service**, signed by the other party(ies). Whatever method you choose, the original proof of service must be filed with the Clerk of the Court before the date of the hearing.

SERVES ON THE STATE OF ARIZONA: If one of the parties is using the child support enforcement service of the Department of Economic Security (DES) notice of this action **must also** be given to that office.

You may mail or personally deliver a copy of the Request to Enforce to the Pinal County Attorney General's Child Support Services Section and provide documentation to:

Attorney General's Office/IV-D Attorneys
555 W Main Ave
Casa Grande, AZ 85122

See the following ***Instructions after Receiving an Order to Appear*** for more information.

(1)

Name of Person Filing: _____

Street Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Email Address: _____

ATLAS Number (if applicable) _____

Representing Self (No Attorney) or Represented by Attorney

If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

Regarding the Matter of:

(3)

Name of Petitioner

(5) CASE NUMBER: _____

REQUEST TO ENFORCE SUPPORT:

(6) Child Support

Spousal Support

Medical / Dental / Vision Expenses

Other

(4)

Name of Respondent

HONORABLE: _____

THIS FORM IS NOT TO BE USED TO REQUEST A CHANGE IN THE TERMS OF EXISTING ORDER, BUT RATHER TO ENFORCE THOSE EXISTING TERMS.

1. On (7) _____, (8) _____ was ordered

By (9) _____ of this court to pay support **OR** provide

as follows: (10) _____

2. The total amount of support past due is (11) \$ _____ for the time period of:

(12) _____ to _____

3. I request that the Court take any or all of the following actions:

- A. Order the Obligor to bring to court at the time of the hearing all those items set forth on the Order to Appear.
- B. Enter judgment for past-due support, court costs and interest.
- C. Enter an assignment for payment on current support, past-due support, clerk's fees and interest.
- D. Find the other party in contempt of court, which includes, but is not limited to, incarceration.
- E. Issue an arrest warrant if the other party fails to appear and/or enter a default judgment.
- F. Other: (13)

G. Such other relief as deemed just and proper by the court.

OATH OR AFFIRMATION AND VERIFICATION

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

(14)

_____ Date

_____ Signature

State of Arizona)

County of _____)

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

by _____
Name of Signer

_____ Commission Expires

_____ Notary Public

(1)

Name of Person Filing: _____

Street Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Email Address: _____

ATLAS Number (if applicable) _____

Representing Self (No Attorney) or Represented by Attorney

If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

Regarding the Matter of:

(3)

Name of Petitioner

(5) CASE NUMBER: _____

**ORDER TO APPEAR ON
ENFORCEMENT OF SUPPORT**

(4)

Name of Respondent

HONORABLE: _____

TO:

(6) _____

ADDRESS:

A REQUEST TO ENFORCE SUPPORT HAVING BEEN FILED:

IT IS ORDERED that you appear for hearing at the time and place shown below:

DATE AND TIME OF HEARING:

_____ at _____ **AM/PM**

PLACE OF HEARING:

So the court can decide whether to enter an order for the relief asked for in the Request to Enforce Support.

You need not file a written response or answer. However, if you fail to appear at the hearing, the court may hear evidence and enter an order against you.

IT IS FURTHER ORDERED that you bring to the hearing all of the following:

- a. The financial affidavit attached to this order, which must be completed by you prior to the hearing.
- b. Copies of your Federal and State income tax returns (personal, partnership and corporate) as well as schedules, attachments, W-2s and 1099 for the past three years.
- c. Copies of your pay stubs or statements of earnings for the last six months.
- d. The most recent statements reflecting the amount of payments of any benefits such as social security, SSI, AFDC, unemployment compensation, workmen's compensation, trust income, retirement benefits and the like.
- e. Statements for the last six months on accounts with:
 - i. Banks, savings and loans and investment companies.
 - ii. Credit card companies, such as VISA, Master Card, Discover, American Express, and Department Stores credit cards.
- f. Proof of the cost of medical insurance actually paid by you for the benefit of the minor children. Such verification may include a letter from your employer insurer or other appropriate proof.
- g. Proof of the availability medical insurance coverage, the cost of available coverage, person for whom you are providing medical insurance, the actual cost, the insurance carrier and the policy number.
- h. Payments records or check stubs reflecting you payment of support for children other than the children for whom support is sought in this proceeding, for the past twelve months.
- i. Proof of direct payments of support for which you are requesting credit.

WARNING: FAILURE TO APPEAR AT THIS HEARING MAY CAUSE A CIVIL WARRANT TO BE ISSUED FOR YOUR ARREST.

(Dated)

(Judge/Special Commissioner)

INSTRUCTIONS AFTER RECEIVING AN ORDER TO APPEAR

SERVICE

Service means giving legal notice to the other party that you have filed court papers. Legal notice means that the other parties have been provided copies of the papers that you have filed with the court.

You have been given an Order to Appear for a Court hearing. You need to make three (3) copies of the Order to Appear. Keep one (1) copy for your records.

You **MUST** serve all other parties with a copy of the Order to Appear and a copy of the Petition that you filed. Service must occur 10 business days prior to the scheduled hearing/conference.

The two most common methods of service are (1) personal service done by a private process server or sheriff, and (2) acceptance of service by the other party if they agree to receive the paperwork from you.

If you use the process server or sheriff, the process server or sheriff will then file an Affidavit of Service with the Court, when service is completed. This proves that party(ies) have been served.

If the other party agrees to accept service, you can serve the other party with an Acceptance of Service form. The other party must sign it in front of a notary. This form then must be filed with the Clerk of Court. This proves that the party(ies) have been served.

If the Attorney General's Child Support Services Section has been involved with your case, you **MUST** serve the Attorney General's office. The Attorney General's office will ACCEPT service. You must deliver an Acceptance of Service form to the Child Support Services Section of the Attorney General's office.

After the Attorney General's Office signs the Acceptance of Service, you **MUST** file the signed Acceptance of Service form with the Clerk of Court. This proves that the Attorney General's Child Support Services Section has been served.

If you have questions about service consult an attorney for information regarding these and other methods of service.

For more information review the Rules of Family Law Procedure.

Forms can be found at:

<http://www.coscpinalcountyz.gov/forms.html>

Other Information within the Order to Appear

Read the Order to Appear carefully. It directs you to exchange documents prior to your hearing, tells you what you will need to bring to court with you, and provides other directions.

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

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 CHILD SUPPORT ("Standard Mod")

- Petition to Modify Child Support – Std. Process
- Affidavit of Financial Information
- Order to Appear

**STOP ORDER OF ASSIGNMENT/
INCOME WITHHOLDING ORDER**

- Petition to Stop Order of Assignment
- Blank Request for Hearing

CHILD SUPPORT

(to establish when paternity already *legally* established)

- Petition
- Order to Appear
- Child Support Worksheet

**MODIFY SPOUSAL MAINTENANCE OR SPOUSAL
AND CHILD SUPPORT ("Standard Mod")**

- Petition to Modify Support Order
- Order to Appear
- Affidavit of Financial Information

**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

**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)