

**PETITION TO MODIFY
LEGAL DECISION MAKING
(CUSTODY), PARENTING
TIME (VISITATION) and
CHILD SUPPORT**

**To Change an
Existing Court Order
(Forms Packet)**

**For Child Support and/or Spousal Maintenance you
may also need the following forms C17.**

NOTICE: This process requires calculation of child support. To calculate child support, you may use the online calculator through ezcourtforms, the packet titled “Calculate Child Support”, or you may make an appointment with the Clerk of Court to calculate support for you for a fee.

SELF-SERVICE CENTER

HELPFUL INFORMATION ABOUT GETTING A CHANGE OF CUSTODY, CHILD SUPPORT and PARENTING TIME

IMPORTANT INFORMATION. The following is important information on when you can legally ask the court for a change of custody, parenting time and child support. Read it carefully **before** you fill out the Petition.

1. WHEN CAN YOU FILE FOR A CHANGE OF CUSTODY?

- A. IF YOU HAVE A JOINT CUSTODY ORDER** - You can **only** ask for a change of custody if the following applies to your case:
- At least one (1) year has passed since your joint custody order was signed by the court and there have been significant changes in circumstances that make a change in custody necessary for the good of the minor child(ren), **OR**
 - At least six (6) months have passed and the other parent has not followed the joint custody order, **OR**
 - There has been domestic violence, spousal abuse, or child abuse and you have evidence that the best interest of your minor child(ren) requires a change.
- B. IF YOU HAVE A SOLE CUSTODY ORDER** - You can **only** ask for a change of custody if the following applies to your case:
- at least one(1) year has passed since your sole custody order was signed by the court, and there have been significant changes in circumstances that make a change in custody necessary for the good of the minor child(ren), **OR**
 - There is reason to believe that the minor child(ren)'s current environment may seriously endanger the child(ren)'s physical, mental, moral or emotional health and your minor child(ren) is/are at risk.

WARNING: If enough time has not passed since the signing of your decree/order to allow you to file for a change of custody, you **cannot** file for a change of custody, **unless** your case falls under one of the exceptions listed above. You may, however, want to seek mediation or counseling as soon as possible (see below).

IMPORTANT: If you have reason to believe that the other parent, or someone associated with the other parent, is physically abusing or hurting your minor child(ren), you should contact Child Protective Services or your local Police Department immediately. If your minor child(ren) is/are in a dangerous situation, you should take steps to file a **"Petition to Modify Custody and/or Parenting Time and Child Support"** to get a permanent change of custody and/or parenting time, **and** a **"Petition for Temporary Modification Without Notice to the Other Party"** (formerly known as an "emergency modification") as soon as possible. Forms are available from the Self-Service Center.

2. THINGS TO CONSIDER BEFORE FILING A CHANGE OF CUSTODY:

- A.** Filing for a change of custody and/or parenting time is a **serious matter** and generally should be considered as a **last resort**. Raising a minor child(ren) in two households, arranging for parenting time, and making joint decisions about a minor child(ren)'s welfare can lead to high levels of stress, conflict, and anger between you and the other party, and the minor child(ren). Unless your minor child(ren) is/are in immediate physical or emotional risk you may want to seek counseling or mediation **before** you take legal action.

Mediation is a process where you and the other parent meet with a professional who will try to help you work together to find a solution to your problem. The mediator is not there to take sides, but can help you understand the other parent's point of view. The mediator will help you approach your problems in a way that will more likely lead to an agreement and will help you to focus on your minor child(ren)'s needs first.

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Use only most current version

Mediation services are available through the Conciliation Services department in the Superior Court, or through private mediation services. You may also want to consider family counseling to learn how to better deal with ongoing problems. A list of mediators and counselors is available through the Self-Service Center or you can contact Community Information and Referral Services at 602-263-8856.

- B.** To change custody, you must convince the judge through appropriate evidence, that the best interests of the minor child(ren) requires that custody be changed. The judge usually will **not** change custody unless you can show that there is a **substantial and continuing change of circumstances**. What this means is that you must convince the judge that something has happened since the Decree or Order was signed that will be **continuing** and which makes you the better parent to have custody of the minor child(ren). Changes like a new spouse, change or loss of job, or new place of residence are generally not enough to change custody.

You must show that the change or situation has a **substantial effect** on the minor child(ren)'s well being. Judges generally do **not** want to put a minor child(ren) through another serious change in surroundings, unless he or she is convinced it is necessary for the child(ren)'s welfare.

There are many things the judge may look at in deciding "the best interest of the minor child(ren)." The law says that the court will look at issues such as:

- how the minor child relates to parents, brothers and sisters;
- how the minor child is doing in school and socially;
- which parent is more likely to cooperate in giving parenting time to the other parent;
- which parent is better able mentally and physically to care for the minor child;
- which parent has provided the primary care to the minor child; and
- evidence of what a parent has done to convince the other parent to make a custody agreement.

The court will give serious consideration to domestic violence against you, the minor child, or another person in the child's presence when deciding whether or not to change custody. Evidence of drug or alcohol abuse by either parent is also an important factor in a custody decision.

3. TIPS FOR FILING A CHANGE OF CUSTODY. A change of custody has several special requirements that you should understand before you begin.

Tip #1: Whenever possible, try to solve your custody problems through counseling or mediation, **unless** your minor child(ren) is/are at immediate risk. If you don't try to solve your problems before you file, your chances of success will be reduced in court.

Tip #2: Before you file, make sure six (6) months have passed since your final joint custody Decree/Order was signed, or one (1) full year has passed since your sole custody Decree/Order was signed, **unless** you meet an exception listed above.

Tip #3: Be sure that the changes in circumstances that caused you to request the change of custody are **important** and **related to issues** of your minor child(ren)s long term best interest. In other words, do **not** file for a change of custody, if you simply aren't getting along with the other parent or have changed your mind about custody. Be sure that if you are making allegations of abuse or neglect, that you have witnesses or evidence to back up your statements.

Tip #4: If your minor child(ren) has/have been **seriously hurt or physically abused**, contact the appropriate authorities and file a **"Petition for Temporary Modification of Custody Without Notice"** to get the minor child out of the dangerous environment as soon as possible. You will still need to file a **"Petition to Change Custody."** These forms are available at the Self-Service Center.

SELF-SERVICE CENTER

INSTRUCTIONS FOR FILLING OUT THE “PETITION TO MODIFY CHILD CUSTODY, PARENTING TIME and CHILD SUPPORT”

IMPORTANT NOTICE TO VICTIMS OF DOMESTIC VIOLENCE: All court documents request your address and phone number. If you are a victim of domestic violence, are in a domestic violence shelter, or if you do **not** want your address known to protect yourself or your minor children from further violence, you must file for an **“Order of Protection”** and ask that your address **not** be disclosed on court papers. With that Order, just write “protected” when asked for this information and update the Clerk of the Court with an address and phone number as soon as possible.

Use this form **only** if you already have a court order concerning child custody. You will want to have a copy of your Order in front of you as you fill out these papers.

A. PLEASE TYPE OR PRINT WITH BLACK INK ONLY!

In the top left corner of the first page, provide the information requested about **YOU**. If your address is protected by court order, write **“protected”** in the space for address and make sure the Court has a means of contacting you on file.

B. Fill in the top section where it says Name of Petitioner, Name of Respondent, AND Case Number, exactly as it appears on your original Maricopa County court case where custody was originally ordered.

GENERAL INFORMATION:

- 1. Information about Me:** Fill in your name, address (if not protected) and how you are related to the minor children.
- 2. Information about the Other Party:** Fill in the other party’s name, address (if not protected) including city, state and zip code and how the other party is related to the minor child(ren).
- 3. Information about the children for whom I want the custody/parenting time order changed:** Provide the information requested on all the children under 18 years of age for whom you are seeking to make a change in child custody, parenting time and child support.
- 4. Affidavit regarding Minor Children.** If the minor children have resided in Arizona since the entry of the last Arizona Custody Order check the first box. If not, you must attach an Affidavit regarding Minor Children and check the second box. The Affidavit regarding Minor Children form is in the forms packet.
- 5. Information about the Order I want to change.** Write in the date the Judge signed the Order, the name of the court (“Superior” or “District”, etc.), the name of the county, and the name of the state where the order was signed.

What your Order now says: This is where you tell the judge exactly what part of your decree/order you want to change. You should find your current decree/order, read it carefully several times and then decide what parts you want to change. Find the part you don’t agree with and then **COPY IT WORD FOR WORD** into the space provided.

6. **Domestic Violence.** Check the box to indicate whether “significant” domestic violence has occurred. If “yes” (it has), explain to the Court. Joint Custody cannot be awarded if there has been “significant” domestic violence (A.R.S. § 25-403.03).
7. **Why the Decree/Order should be changed:** This is where you briefly explain to the judge why you think a change of your decree/order is necessary for the best interest of the minor child(ren). If you need more room, you can use extra sheets of paper and attach it to this Petition.
8. **MEDIATION/ADR (Alternative Dispute Resolution):** Answer the questions regarding any requirement in your existing court order that you and the other party pursue mediation or some form of ADR before filing for modification through the court. If your Order requires you to pursue mediation or some form of ADR, explain what steps you have taken to comply with that requirement, if any.

REQUESTS I MAKE TO THE COURT: This is where you explain to the judge what you want your decree/order on custody to say.

A. CUSTODY AND PARENTING TIME:

JOINT CUSTODY: If you are asking for joint custody, check this box, and write in the names of the minor children in the space provided. If you check this box, complete the “**Parenting Plan**” before you go to the judge for your final order. The “**Parenting Plan**” is in the (#3) “Orders” packet.

SOLE CUSTODY: If you want sole custody, check the boxes that apply, including the parenting time you are asking for. Tell the court whether you want custody of the minor children to go to you or the other party.

PARENTING TIME: Mark one box only. You can ask that the non-custodial parent (the parent having physical custody of the minor children less than 50% of the time) have one of the following types of parenting time:

1. **Reasonable Parenting Time**--this suggests an amount of parenting time appropriate to the age of the child.
2. **Reasonable Parenting Time by agreement of both parents** -- Complete the “**Parenting Plan**” before you go to the judge for your **final** order. The “**Parenting Plan**” is in the “Orders” packet.

Refer to “**Planning for Parenting Time: Arizona’s Guide for Parents Living Apart**” to help make your new parenting plan. The **Guide** is available for purchase at all Superior Court Self-Service Center locations, **or** may be viewed online and downloaded for **free** from the state courts’ web page.

3. **Supervised Parenting time to the Non-Custodial Parent.** You should request supervised parenting time if the non-custodial parent cannot adequately care for the minor children without another person present. You may request this if the person not having custody abuses drugs or alcohol; is violent or abusive; or, does not have the parenting skills to care for the minor child(ren) without another adult present. Remember, supervised parenting time is not intended to punish the parent, but to protect the minor child(ren). You must write the reasons why parenting time should be supervised.

4. **No Parenting time to the Non-Custodial Parent.** You should mark this box **only** if the non-custodial parent has seriously harmed, abused, or otherwise is a serious danger to the minor children's physical and emotional health, or if there is a criminal court order stating there is to be no contact between the minor children and the non-custodial parent. This is a last resort to protect the minor children.

NOTE: Even if you do not want to change the child support amount, the judge will still review all the financial information to determine if child support should be changed.

- B. **CHILD SUPPORT:** Mark the box to indicate which party will pay child support. Fill in the amount from item **35** of the completed **"Parent's Worksheet for Child Support"** included in the "Forms" packet, **OR if you are requesting an amount different from the Worksheet amount (a deviation)**, enter *that* amount. Check one of the boxes to indicate whether you are requesting the amount calculated on the Worksheet – or to deviate from that amount based on other factors. You may also use the FREE Online Child Support Calculator to produce the **Parents Worksheet**. Click on "Child Support Calculator and Worksheet", on right side of the page to begin. See the instruction document **DRS12h** in this packet for more information.

You may also be required to present an **Affidavit of Financial Information** (drosc13f) (**AFI**) especially if requesting to deviate from the amount listed on the Parent's Worksheet, and may need to refer to the **"Arizona Child Support Guidelines"** (drs10h) as well. These documents are available at the Self-Service Center and online in the family court section.

- C. **MEDICAL, DENTAL, VISION CARE INSURANCE PAYMENTS AND EXPENSES:** Mark which party should be responsible for health, medical, dental, and vision care insurance and other related expenses. Then write in what percentage mother should pay and what percentage father should pay of those expenses not covered by insurance. The total percentage must be **100%**.
- D. **FEDERAL INCOME TAX DEDUCTION.** Tell the court whether mother or father should claim the minor children as income tax deductions every year or every other year.
- E. **OTHER ORDERS:** Fill in this information only if you have made other requests to the court. Write the specific additional orders you are requesting the court to make that were not covered elsewhere in your Petition. Use extra pages if necessary.
- F. **OATH OR AFFIRMATION AND VERIFICATION:** **This document** must be signed in front of a Deputy Clerk of Court or Notary. By signing the Petition under Oath or Affirmation, you are stating , under penalty of perjury, that the information is true and correct.

WHAT NEXT? Read and follow the instructions in the document called **"Procedures: What to do After You Have Completed the Petition to Change Child Custody, Parenting Time and Support"**.

SELF-SERVICE CENTER

PROCEDURES: HOW TO FILE YOUR PETITION TO MODIFY CHILD CUSTODY, PARENTING TIME AND CHILD SUPPORT

STEP 1. COMPLETE ALL REQUIRED PAPERWORK:

- “*Petition to Modify*” (“*the Petition*”)
- “*Notice of Filing for Modification of Child Custody*”
- “*Child Support Worksheet*” (also known as “*Parents Worksheet for Child Support*”)
- “*Affidavit Regarding Minor Children*” (**Only required when** the children have resided outside the state of Arizona at some time since the date of the last custody order).
- “*Current Employer Information Sheet*” (“*CEI*”) (for the parent currently paying support)
- “*Order Stopping Income Withholding Order*” (if applicable) and “*Current Employer Information Sheet*”. (if this agreement changes who pays the child support, include a *second* CEI for the parent who will now pay.)

STEP 2. MAKE COPIES AND FILE THE PAPERS WITH THE CLERK OF COURT: Make **three (3)** copies of the paperwork you completed: one for you, one for the other party, and one for the Judge. **If the State of Arizona (DES/DCSE) is a party, make a 4th copy to serve on the Attorney General’s Office.** See **Step 3** on next page for more information on serving notice on the State.

Each set should contain the following documents:

<p><u>Originals:</u> “<i>Petition to Modify</i>” “<i>Notice of Filing for Modification of Child Custody</i>” “<i>Child Support Worksheet</i>” “<i>Affidavit Regarding Minor Children</i>” (if applicable) “<i>Current Employer Information Sheet</i>” “<i>Order Stopping Income Withholding Order</i>” and (2nd) “<i>Current Employer Information Sheet</i>” (if applicable) **</p>	<p><u>Judge’s Copies</u> “<i>Petition to Modify</i>” “<i>Notice of Filing for Modification of Child Custody</i>” “<i>Child Support Worksheet</i>” “<i>Affidavit Regarding Minor Children</i>” (if applicable) “<i>Order Stopping Income Withholding Order</i>” and (if applicable) **</p>
<p><u>Your Copy:</u> “<i>Petition to Modify</i>” “<i>Notice of Filing for Modification of Child Custody</i>” “<i>Child Support Worksheet</i>” “<i>Affidavit Regarding Minor Children</i>” (if applicable) “<i>Order Stopping Income Withholding Order</i>” (if applicable) **</p>	<p><u>Other Party’s Copy:</u> “<i>Petition to Modify</i>” “<i>Notice of Filing for Modification of Child Custody</i>” “<i>Child Support Worksheet</i>” “<i>Affidavit Regarding Minor Children</i>” (if applicable) “<i>Order Stopping Income Withholding Order</i>” (if applicable) **</p>
<p>* <u>Attorney General’s copies</u> (<i>only if required – see Step 4 on next page</i>) “<i>Petition to Modify</i>”, “<i>Notice of Filing for Modification of Child Custody</i>” “<i>Child Support Worksheet</i>” “<i>Affidavit Regarding Minor Children</i>” (if applicable) “<i>Acceptance of Service</i>” (original) and self-addressed stamped envelope (addressed back to you) “<i>Order Stopping Income Withholding Order</i>” (if applicable) **</p>	
<p>* IF one of the parties is using the child support services of the Division of Child Enforcement (DCSE), add one additional copy of the proposed Order and attachments and a stamped envelope addressed to the Attorney General (see Step 4, below for address).</p>	
<p>** IF this agreement changes who pays child support include a <i>second</i> CEI for parent who will NOW pay.</p>	

STEP 3. FILE THE ORIGINAL documents with the Clerk of the Court at the filing counter.
Ask the clerk to stamp the extra copies and return those to you. These are called "conformed" copies.

Graham County Clerk of the Court
800 W. Main Street
Safford, Arizona 85546

FEES: A list of current fees is available from the Self Service Center and from the Clerk of Court's website.

If you cannot afford the filing fee and/or the fee for having the papers served by the Sheriff or by publication, you may request a deferral (payment plan) when you file your papers with the Clerk of the Court. Deferral Applications are available at no charge from the Self-Service Center.

After you have filed your documents the Clerk will then direct you to one of the following administrative offices or to the in-box of the Judicial Officer who will hear your case to deliver the "Judge's Copies."

Graham County Clerk of the Court
800 W. Main Street
Safford, Arizona 85546

STEP 4: SERVE THE PAPERS ON THE OTHER PARTY(IES). The papers may be delivered by the Sheriff's Department, 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 **Acceptance of Service** as described in the "SERVICE" packet available from the Self-Service Center or through the Superior Court's Website.

The State of Arizona may be involved if any party received public assistance for the children or used the services of the State in establishing or collecting child support. If either party already has a case with the State (**DCSE or DES**) involving the same children as in this case, notice of this action **must also** be given to the Attorney General's Office.

SERVING PAPERS ON THE STATE: (*if required*). The Office of the Attorney General (the "AG") will accept service by signing an "Acceptance of Service" form and returning the form for **you** to file with the Court. There are no court fees for serving the State with an Acceptance, as described below:

- (a) You may mail or personally deliver to the Office of the "AG" assigned to your case:
- a copy of the "Petition to Modify",
 - a copy of the "Parents Worksheet for Child Support", along with an
 - "Acceptance of Service" AND
 - a self-addressed, stamped envelope (addressed back to you).

A list of addresses for the AG's offices is available from the Self-Service Center or through the Superior Court's Website.

(b) There may also be a "drop-box" in the Clerk of Court's filing counter area at which you may leave the above listed documents and the envelope for the AG. Ask the clerk at the filing counter, or

(c) You may mail all listed documents *and the envelope* to:

Office of the Attorney General
Child Support Enforcement Section
P.O. Box 6123 – Site Code 775C
Phoenix, AZ 85005

Note: The State is not considered served until the AG's signed Acceptance of Service is filed with the Court!

STEP 5: At least 25 days after the other party was served or signed the “Acceptance of Service”:

1. File the “Request for Order Granting or Denying a Hearing”.
2. Provide a copy of the “Request for Order Granting or Denying a Hearing” to the Judge assigned to your case, and
3. Send a copy of the “Request for Order Granting or Denying a Hearing” to the other party(ies).

The Judge will either approve or deny your request for a hearing. You will receive a notice in the mail with the Judge’s decision. If a hearing is ordered, the notice will contain information about the date, time, and location of the hearing.

Do not copy
or file this page

Self-Service Center (SSC)

HOW TO COMPLETE A PARENTS WORKSHEET FOR CHILD SUPPORT

Use the **FREE** online child support calculator at the Superior Court's Web page to produce the *Parents Worksheet for Child Support* that **MUST** be turned in along with your other court papers.

Using the online calculator is FREE (access to the Internet and a printer required).

If you do not have access to the Internet and/or a printer, you may use the computers at all Superior Court Self-Service Center locations for free and print out the Parents Worksheet produced by the online calculator as well. There is a small, per-page charge for printing.

- Go to the Superior Court's ezcourtform Web page
- Click "**Child Support Calculator**" on right side of the web page.
- Fill in the information requested and print out the Worksheet.

Advantages of Using the Online Child Support Calculator

- The online calculator is free.
- The online calculator does the math for you
- The online calculator produces a neater, more readable worksheet.
- The online calculator produces a more accurate child support calculation, **AND**
- **You don't have to go through 37 pages of Guidelines and Instructions**

If you want to perform the calculations yourself, you will need an additional 39 pages of guidelines, instructions, and the Parents Worksheet itself. These are available for separate purchase from the SSC as part of the "**How to Calculate Child Support**" packet, or may be downloaded for free from the Superior Court's Web page.

**WHEN YOU HAVE COMPLETED ALL NEEDED FORMS, GO TO THE "PROCEDURES" PAGE
AND FOLLOW THE STEPS LISTED THERE.**

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____



For Clerk's Use Only

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

Petitioner (in original case)

Case Number: _____

ATLAS Number: _____

Respondent (in original case)

PETITION TO MODIFY LEGAL DECISION MAKING (CUSTODY), PARENTING TIME and CHILD SUPPORT

I, _____ am the Petitioner or Respondent
(print your name) and make the following statements to the Court:

GENERAL INFORMATION:

1. Information about Me

Name: _____

Address: _____

How I am related to minor child(ren) for whom the LEGAL DECISION MAKING(CUSTODY) / PARENTING TIME order should be changed: Mother OR Father

2. Information about the Other Party(ies)

Name: _____

Address: _____

How the other party is related to minor child(ren) for whom the LEGAL DECISION MAKING (CUSTODY)/PARENTING TIME order should be changed: Mother OR Father

3. Information About the Minor Child(ren) for whom I want the order changed:

Name: _____

Name: _____

Birth Date: _____ Age: _____

Birth Date: _____ Age: _____

Name: _____

Name: _____

Birth Date: _____ Age: _____

Birth Date: _____ Age: _____

4. **Affidavit Regarding Minor Children.** The minor children have resided in Arizona since the entry of the last Arizona Legal Decision Making (Custody) Order **OR** (if not) I have attached an "Affidavit Regarding Minor Children".

5. **Information about the Order I want to change:**

The Order was issued on: _____ (Month/Day/Year)
The Order was issued by: _____ (Name of Court)
Located in this County: _____
Located in this State: _____

- And each of the following is a true statement:
- The minor child(ren) have lived in Arizona for at least six (6) months before the date I am filing this Petition or since birth, if younger than six (6) months.
 - If the Order was not issued by the Superior Court of Arizona in this county, the case has already been transferred to this county and has a Maricopa County case number.

WHAT THE ORDER NOW SAYS: Put in **WORD FOR WORD** the part of the decree/order you want to change. (Use extra paper if necessary) _____

6. **DOMESTIC VIOLENCE.** (If you are requesting a change to joint legal decision making (custody), there must not be "significant" domestic violence. A.R.S. § 25-403.03)
 No significant domestic violence has occurred **OR** domestic violence has occurred. Explain:

7. **WHY THE DECREE/ORDER SHOULD BE CHANGED:** These are my reasons why I believe that a change of legal decision making (custody) and/or parenting time is in the best interest of the child(ren) (Use extra pages if necessary):

8. **MEDIATION / ADR (Alternative Dispute Resolution) REQUIREMENTS IN PRIOR ORDER:**

- The current Court Order **does not require** the parties to pursue Mediation or ADR before filing to modify legal decision making (custody) or parenting time. **OR**
- The current Court Order **does** require the parties to pursue Mediation or ADR before filing to modify legal decision making (custody) or parenting time, and this is what I/we have done to comply with that requirement:

REQUESTS I MAKE TO THE COURT:

A. LEGAL DECISION MAKING (CUSTODY) AND PARENTING TIME.

Joint Legal Decision Making (Custody). I want the mother and father to be awarded joint legal decision making (custody) of the minor child(ren) _____ (names of children) subject to a Parenting Plan addressing primary residential parenting to be submitted later. **OR**

Sole Legal Decision Making and Physical Custody. Sole legal decision making (custody) of _____ (name(s) of minor child(ren)) should be awarded to **Mother** **Father** and/or sole legal decision making (custody) of _____ (name(s) of child(ren)) should be awarded to **Mother** or **Father**, *subject to* parenting time as follows:

1. **Reasonable parenting time** to the parent who does not have legal decision making (custody) according to the _____ County Parenting time Guidelines; **OR**
2. **Reasonable parenting time** to the parent/party who does not have legal decision making (custody) according to the attached Parenting Plan; **OR**
3. **Supervised parenting time** but only in the presence of another person; **OR**
4. **No parenting time** rights to **Mother** or **Father**
Supervised parenting time or no parenting time is requested for the following reasons:

B. CHILD SUPPORT. **Mother** **OR** **Father** should pay child support to **Mother** **OR** **Father** in the amount of \$ _____ per month on the first day of every month, beginning the first day of month following the filing of this Petition based upon the attached **“Child Support Worksheet.”** All child support payments should be made through the Child Support Clearinghouse, and will be subject to an applicable statutory fee through an automatic Income Withholding Order.

C. MEDICAL, DENTAL, VISION CARE

Mother should be responsible for providing: medical dental vision care insurance.

Father should be 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.

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.

D. FEDERAL INCOME TAX DEDUCTION.

The right to claim the minor child(ren)ren as a deduction for Federal income tax purposes should be divided as follows: **Person entitled to claim:** "M" for Mother, "F" for Father.

Claim by:	Name of Child	Starting Tax Year:
<input type="checkbox"/> M <input type="checkbox"/> F	_____	<input type="checkbox"/> Every Year <input type="checkbox"/> Every Other
<input type="checkbox"/> M <input type="checkbox"/> F	_____	<input type="checkbox"/> Every Year <input type="checkbox"/> Every Other
<input type="checkbox"/> M <input type="checkbox"/> F	_____	<input type="checkbox"/> Every Year <input type="checkbox"/> Every Other
<input type="checkbox"/> M <input type="checkbox"/> F	_____	<input type="checkbox"/> Every Year <input type="checkbox"/> Every Other

E. OTHER ORDERS. I request further Orders relating to this matter as follows:

**F. DECLARATION UNDER PENALTY OF PERJURY
UNDER OATH OR BY AFFIRMATION**

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

_____ Date

_____ Signature

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

_____ Deputy Clerk or Notary Public

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA GRAHAM COUNTY

Name of Petitioner

Case Number: _____

Name of Respondent

NOTICE OF FILING PETITION FOR MODIFICATION OF LEGAL DECISION MAKING (CUSTODY)

(A.R.S. § 25-1035)

A Petition for Modification of Legal Decision Making (Custody) has been filed. A copy of the petition and/or affidavits is served on you with this Notice.

If you do not want a modification order taken against you without your input, you must file a response in writing with the court within twenty (20) days from the date of service. A copy of each response document shall be provided to the applicant's attorney or, if unrepresented, the applicant and to the assigned division.

No sooner than five (5) days after expiration of the time permitted for the filing of the response, either party or attorney shall provide a Request for Order Granting or Denying Legal Decision Making (Custody) Hearing to the assigned division. The court shall determine whether a legal decision making (custody) hearing should be granted. A copy of the court's determination shall be mailed by the court to all persons entitled to notice.

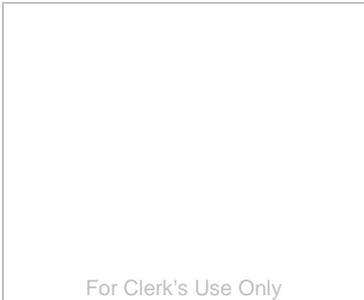
Requests for reasonable accommodation for persons with disabilities must be made to the office of the judge or commissioner assigned to the case, at least five (5) days before your scheduled court date.

Signed and sealed this date: _____

DARLEE MAYLEN, CLERK OF SUPERIOR COURT

By: _____
Deputy Clerk

Person Filing: (1) _____
 Address (if not protected): _____
 City, State, Zip Code: _____
 Telephone: _____
 Email Address: _____
 ATLAS Number: _____
 Lawyer's Bar Number: _____



For Clerk's Use Only

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY⁽²⁾ PARENT'S WORKSHEET FOR CHILD SUPPORT

(3) Petitioner: _____ (4) Case No. _____

(3) Respondent: _____ (4) ATLAS: _____

(5) Total Number of Children: _____

(6) Parent with Primary Physical Custody:

Father Mother

(7) Parent who is filing this form: Father Mother

(8) Gross Income figures for the OTHER PARENT are:

ACTUAL, with proof, such as a recent W2 or pay stub attached, or other party's signed statement.

ESTIMATED, based on facts or knowledge of pay before promotion or of others in similar job.

ATTRIBUTED, based on what other party could and should be earning (see Guidelines 5e).

	<u>FATHER</u>	<u>MOTHER</u>
Gross Income (Pre-Tax Income. Before deductions.)	\$ _____ (9)	\$ _____
Spousal Maintenance Paid	\$ - (10)	\$ -
Spousal Maintenance Received	\$ + (11)	\$ +
Child Support Paid/Contributed	\$ - (12)	\$ -
Other Support of Children Paid	\$ - (13)	\$ -
Adjusted Gross Income	\$ _____ (14)	\$ _____
Combined Adjusted Gross Income	(15) \$ _____	
Basic Child Support Obligation	(16) \$ _____	
Plus Costs for:		
Medical/Dental/Vision Insurance	\$ _____ (17)	\$ _____
Childcare	\$ _____ (18)	\$ _____
Education Expenses	\$ _____ (19)	\$ _____
Extraordinary/Special Needs Child Expenses	\$ _____ (20)	\$ _____
No. of Children Age 12 or Over _____ Adjustment _____ %	(21) \$ _____	
Total Adjustments for Costs	(22) \$ _____	
Total Child Support Obligation	\$ _____ (23) \$ _____	

Case No. _____

	FATHER		MOTHER
Each Parent's % of Combined Income	_____ % (24)		_____ %
Each Parent's Share of Tot. Support Obligation	\$ _____ (25)		\$ _____

Adjustment for Non Custodial Parent's Costs Associated with Parenting Time

Using Table A Table B \$ _____ (26) \$ _____

No. of Days _____ = _____% **Adjustment** (from table)
x Line (16) \$ _____ (Basic Child Support Obligation) \$ _____ (27) \$ _____

Less Noncustodial Parent's Costs for:

Medical/Dental/Vision Insurance*	\$ _____ (28)	\$ _____
Childcare*	\$ _____ (29)	\$ _____
Education Expenses*	\$ _____ (30)	\$ _____
Extraordinary/Special Needs Child Expenses*	\$ _____ (31)	\$ _____

*Subtract here ONLY if ADDED-IN items 17-20 above

Adjustments Subtotal \$ _____ (32) \$ _____

Preliminary Child Support Amount \$ _____ (33) \$ _____

Self Support Reserve Test for Parent Who Will Pay

Amount from Line (14)	_____ (Adj. Gross Inc.)		
Minus Reserve Amount	- \$903.00		
Total	=	\$	_____ (34) \$ _____

Child Support to be Paid by: Father Mother \$ _____ (35) \$ _____

Share of Travel Expenses Related to Parenting Time* _____ % (36) _____ %

*Only for expenses related to travel over 100 miles, one way.

Share of Medical/Dental/Vision Costs Not Paid by Insurance _____ % (37) _____ %

I declare under penalty of perjury that the foregoing is true and correct.

Executed on: _____
Date

Signature of Parent

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____



FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

Petitioner

Case No. _____

ATLAS No. _____

Respondent

**REQUEST FOR ORDER GRANTING
OR DENYING A LEGAL DECISION
MAKING (CUSTODY) HEARING
A.R.F.L.P. 91(D)(5)**

A petition to modify custody was filed on this date: _____ and the
(Month/Day/Year)

“Petition” and ***“Notice of Filing Petition to Modify Legal Decision Making (Custody)”*** were served on the date below:

_____ Twenty-five (25) days (or more) have passed since service.
(Month/Day/Year)

I hereby request the Court issue an order granting or denying a legal decision making (custody) hearing on this matter.

A copy of this request has already been sent or delivered to the other party and to the assigned Judge or will be sent or delivered today.

I state to the Court under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Signature

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____

For Clerk's Use Only

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

Name of Petitioner

Case Number: _____

ATLAS Number: _____
(if applicable)

Name of Respondent

AFFIDAVIT REGARDING MINOR CHILDREN

NOTICE: This *"Affidavit Regarding Minor Children"* is required for all legal decision making (custody) cases. If you are asking to modify an existing Arizona legal decision making (custody) order, it is only required if the children have lived outside the state at some time in the last 5 years.

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: _____

Birthdate: _____ Age: _____ Birthdate: _____ Age: _____

Name: _____ Name: _____

Birthdate: _____ Age: _____ Birthdate: _____ Age: _____

2. INFORMATION REGARDING WHERE THE CHILDREN UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS (or since birth, if younger than 5).

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 (CUSTODY) AND/OR PARENTING TIME OF THE MINOR 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 (custody) and/or 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 AUTHORITY (CUSTODY) OF THE MINOR CHILD(REN). (Check one box.)

I do have or I do not have information about a legal decision making (custody) court case

Case No. _____

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 (CUSTODY) 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 custody or who claims legal decision-making (custody) 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.

Signature

Date

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public

CURRENT EMPLOYER* INFORMATION

You may also fill out this form online at the Family Support Center Website.

For Clerk's Use Only

THIS FORM MUST BE COMPLETED FOR:

- AN INCOME WITHHOLDING ORDER**
- ORDER TO STOP AN INCOME WITHHOLDING ORDER**
- NOTIFICATION OF A CHANGE OF EMPLOYER (or OTHER PAYOR)**

CASE NUMBER: _____ **ATLAS NUMBER:** _____

NAME OF PERSON ORDERED TO MAKE PAYMENTS:

LIST THE NAME OF THE EMPLOYER* AND THE ADDRESS OF THE PAYROLL OR FINANCIAL DEPARTMENT (for the person named above) WHERE THE INCOME WITHHOLDING ORDER OR STOP ORDER SHOULD BE MAILED.

EMPLOYER* NAME: _____

PAYROLL ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMPLOYER* TELEPHONE: _____

EMPLOYER* FAX: _____

**or other payor or source of funds*

FOR COURT USE ONLY. DO NOT WRITE BELOW THIS LINE.

WA/FSC

WA/LOG ID: _____
TYPE OF W/A _____
DATE _____
AMOUNT OF ORDER _____
EMPLOYER STATUS _____
ENTERED BY _____
NEW W/A _____ SUB _____
AG _____ DCSE _____

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

(1) _____
Petitioner in Original Case

(3) Case No. _____

(2) _____
Respondent in Original Case

(4) ATLAS No. _____

**ORDER STOPPING INCOME WITHHOLDING
ORDER (AND ALL GRAHAM COUNTY SUPPORT
ORDERS)
A.R.S. § 25-504**

To the employer(s) or other payor(s) of:

(5) Name: _____

SSN : _____

DO NOT WRITE BELOW THIS LINE. COURT PERSONNEL WILL COMPLETE THE FORM.

IT IS ORDERED stopping the *Income Withholding Order* dated (6) _____, with the same case number as in (3) above. The employer(s) or other payor(s) is/are ordered to stop withholding monies pursuant to the *Income Withholding Order* immediately upon receipt of this Order.

IT IS FURTHER ORDERED terminating all Graham County child support and/or spousal maintenance orders in this case number and declaring all child support and/or spousal maintenance orders fully paid and satisfied, including all past due support, arrearage judgments and interest.

IT IS FURTHER ORDERED that the Support Payment Clearinghouse shall release any monies currently in its possession and future monies received to the obligor (the person ordered to pay).

Dated: _____

Judicial Officer