

AGREEMENT TO MODIFY PARENTING TIME

OR PARENTING TIME *and* CHILD SUPPORT

1

**WHEN ALL PARTIES WILL SIGN
AGREEMENT TO MODIFY**

(Forms Packet)

SELF-SERVICE CENTER

AGREEMENT TO MODIFY PARENTING TIME or PARENTING TIME and CHILD SUPPORT

CHECKLIST

You may use this packet only if . . .

- ✓ You have a current ***“Parenting Time or Parenting Time and Support Order”*** that was entered in Maricopa County,
- ✓ You wish to modify the ***Order***,
- ✓ **ALL** parties **AGREE** to modify the ***Order***,
- ✓ **You have the notarized signatures of all parties on the *Agreement*, AND**
- ✓ If either party is using the child support collection or enforcement services of the State, **you also have the signature of the Attorney General’s representative** (from DCSE, the Division of Child Support Enforcement).
- ✓ You understand these forms do not deal with back child support (arrears).

DO NOT USE THESE FORMS IF . . .

- X The other party will not sign the agreement (in front of a notary or Court Clerk).
- X You want to change CUSTODY.*

* If you want to change from joint to sole custody or vice-versa, see the checklist for either the “Agreement” or the “Request” to Change Custody, Support and Parenting Time to determine whether either applies to your situation.

FEE WARNING: An Agreement (or “stipulation”) is a filing by BOTH parties. If one of the parties has not previously “made an appearance”, that is he and/or she have not previously filed a response or other papers and paid a filing fee in this case, there will be a substantial **appearance fee** due from that party **in addition to** the filing fee for the modification itself.

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website at www.superiorcourt.maricopa.gov/SSC

SELF-SERVICE CENTER

AGREEMENT TO CHANGE A COURT ORDER FOR PARENTING TIME OR PARENTING TIME AND CHILD SUPPORT

PETITIONER OR RESPONDENT

(Forms Only)

This packet contains court forms to file an **agreement** to modify a court order for child parenting time or parenting time and child support.

Order	File Number	Title	# pages
1	DRMV7k	Checklist: <i>You may use these forms if . . .</i>	1
2	DRMV7ft	Table of forms in this packet	1
3	DRMV71f	<i>“Stipulation (Agreement) to Modify Court Order regarding Parenting Time or Parenting Time and Child Support”</i>	1
4	DRMV78f	<i>“Order Modifying Parenting Time” (or “Parenting Time and Child Support”)</i>	4
5	DRCVG11f	<i>“Parenting Plan”</i>	7
<div><p>Use the FREE Online Child Support Calculator to produce the <i>Parents Worksheet for Child Support</i> that <u>must</u> accompany this <i>petition</i>.</p><p>Click on “Child Support Calculator and Worksheet”, on right side of the page at:</p><p>http://superiorcourt.maricopa.gov/ezcourtforms</p><p>See the document DRS12h (in the instructions packet) for more information.</p></div>			
6	DRS88f	<i>“Current Employer Information”</i>	1
7	DRSW82f	<i>“Order Stopping Income Withholding Order”</i>	1

The documents you have received are copyrighted by the Superior Court of Arizona in Maricopa County. 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.

Petitioner's Name: _____
Address: _____
City, State and Zip Code: _____
Telephone Number: _____
ATLAS Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self (Without a Lawyer) OR ☐ Attorney for Petitioner

FOR CLERK'S USE ONLY

Respondent's Name: _____
Address: _____
City, State and Zip Code: _____
Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self (Without a Lawyer) or ☐ Attorney for Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

Name of Petitioner (in original case)

Case Number: _____ (C)

STIPULATION TO MODIFY THE PRIOR COURT ORDER REGARDING PARENTING TIME or PARENTING TIME AND CHILD SUPPORT

Name of Respondent (in original case)

PETITIONER AND RESPONDENT AGREE AS FOLLOWS:

- 1. AGREE AND UNDERSTAND:** I have read this Stipulation and *the "Order to Change Prior Parenting time and/or Support Order."* I understand and agree with what is written in the Stipulation and Order which is attached. Parenting time and Child Support, if necessary, shall be ordered in accordance with the attached Order which has been approved and signed by both parties. **(D)**
- 2. PRIOR ORDER.** If the new parenting time and/or support order is granted by this court, it will replace
The Order issued on: _____ (Mo/Day/Year)
The Order issued by: _____ (Name of Court)
Located in this County: _____
Located in this State: _____
If the Superior Court of Arizona in Maricopa County did not issue the order, we have attached a copy of the order to the original and all copies of this Stipulation. If the Superior Court of Arizona in Maricopa County issued the order, we have attached a copy of the order to the copy of the papers for the Judge. We have not attached a copy to the original Stipulation. **(E)**
- 3. PARENTING TIME AND CHILD SUPPORT.** The agreement regarding parenting time and child support is in the best interest of the minor child(ren). **(F)**

SIGNATURE BY PETITIONER AND RESPONDENT: Everything stated by me/us in this Stipulation is true and correct to the best of my/our knowledge, information, and belief. **(G)**

PETITIONER

Date

RESPONDENT

Date

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

FOR CLERK'S USE ONLY

Name of Petitioner (in original case)

Case Number: _____

Name of Respondent (in original case)

ORDER MODIFYING

- ☐ **PARENTING TIME** or
☐ **PARENTING TIME AND CHILD
SUPPORT**

THE COURT FINDS:

1. This case has come before this court for a final Order based upon the AGREEMENT OF THE PARTIES.
2. This court has jurisdiction to change parenting time and/or support, and has jurisdiction over the parties. Where it has the legal power to do so and where it is applicable to the facts of this case, this court has considered, approved, and made Orders relating to parenting time and/or support.

3. This Order applies to the following children:
NAME(S)

DATES OF BIRTH /AGE
(Month/Day/Year)

4. **GROUND FOR CHANGING PARENTING TIME and/or Child Support.** Based upon the stipulation (agreement) of the parties, it is in the best interest of the minor child(ren) to change parenting time and/or child support at this time.

THE COURT ORDERS:

The Order regarding parenting time and/or support dated _____ is changed as follows:

A. PARENTING TIME:

1. ☐ **Reasonable parenting time** to the parent who is not the primary residential parent **(OR)**
2. ☐ **Reasonable parenting time** to the parent who is not the primary residential parent according to the Parenting Plan attached. **(OR)**
3. ☐ **Supervised parenting time** but only in the presence of another person, who is named below or otherwise approved by the Court:

The cost of supervised parenting time shall be paid by:

☐ **Mother** or ☐ **Father** or ☐ **shared equally** by the parties, or as follows: _____

Case No. _____

Restrictions on parenting time: _____

(OR)

4. ☐ No parenting time rights to ☐ Mother or ☐ Father due to:

5. ☐ Other parenting time: (explain) _____

B. CHILD SUPPORT.

☐ Child Support is unchanged, or

☐ **Mother** or ☐ **Father** shall pay child support to other party in the amount of \$ _____, per month, payable on the first day of each month, beginning the first day of month following the signing of this Order. All child support payments shall be made through the Support Payment Clearinghouse by the attached ***Income Withholding Order***, and shall include an additional statutory fee for processing.

Child Support is based on the information in the Child Support Worksheet attached and incorporated by reference, and the Arizona Child Support Guidelines, OR

☐ **CHILD SUPPORT DEVIATION.** The court, having considered the best interests of the minor child(ren), deviates from the Guidelines for the following reasons. (Describe reasons.) _____

C. MEDICAL, DENTAL, VISION CARE.

☐ **Mother** is responsible for providing: ☐ medical ☐ dental ☐ vision care insurance.

☐ **Father** 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 Child Support Worksheet 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. Mother is ordered to pay _____ %, AND Father 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.

Child's Name	Date of Birth (Month, Day, Year)	Parent Entitled to Deduction	For Calendar Year
		<input type="checkbox"/> Mother <input type="checkbox"/> Father	
		<input type="checkbox"/> Mother <input type="checkbox"/> Father	
		<input type="checkbox"/> Mother <input type="checkbox"/> Father	
		<input type="checkbox"/> Mother <input type="checkbox"/> Father	

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

E. MEDIATION. The parties are required pursue court sponsored or private mediation or other form of ADR (Alternative Dispute Resolution) prior to filing for any future modification of custody or parenting time (or "visitation", if for someone other than one of the parents).

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

DONE IN OPEN COURT: _____.

JUDGE OR COURT COMMISSIONER

**ORDER MODIFYING PARENTING TIME or PARENTING TIME AND SUPPORT
BASED UPON STIPULATION (AGREEMENT) OF THE PARTIES**

Do not write or sign below this line until you are instructed to do so by Court Clerk or Notary.

OATH OR AFFIRMATION OF THE PARTIES

**By signing this document I swear or affirm that I: have read and understand the terms of this Order;
have entered this agreement of my own free will and not because of any force, duress, undue
influence, coercion, or threat of harm from anyone, including the other party; waive the right to trial
on this matter; and that the information I have provided is true and correct, under penalty of perjury.**

Signature of Petitioner

Date Signed

Printed Name of Petitioner

Sworn or Affirmed before me this date: _____

My Commission Expires/Seal

Deputy Clerk or Notary Public

Signature of Respondent

Date Signed

Printed Name of Respondent

Sworn or Affirmed before me this date: _____

My Commission Expires/Seal

Deputy Clerk or Notary Public

Date

Attorney General's Representative (DCSE) (if applicable)

Approved as to form and content by the parties' lawyers (if applicable):

Petitioner's Lawyer: _____

Respondent's Lawyer: _____

Name of Person Filing Document: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing Self (Without Attorney) OR Attorney for ☐ Petitioner ☐ Respondent

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

Name of Petitioner

Case Number _____

AND

Name of Respondent

PARENTING PLAN FOR:

☐ JOINT LEGAL DECISION MAKING
(CUSTODY) WITH JOINT LEGAL
DECISION MAKING (CUSTODY)
AGREEMENT

or

☐ SOLE LEGAL DECISION-MAKING
(CUSTODY)

☐ to Mother

☐ to Father

INSTRUCTIONS

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

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

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

PART 1: GENERAL INFORMATION:

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

_____	_____
_____	_____
_____	_____

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

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

- ☐ **1. SOLE LEGAL DECISION-MAKING (CUSTODY) BY AGREEMENT.** The parents agree that sole legal decision-making authority (custody) and primary physical custody should be granted to the ☐ Mother ☐ Father.
The parents agree that since each has a unique contribution to offer to the growth and development of their minor children, each of them will continue to have a full and active role in providing a sound moral, social, economic, and educational environment for the benefit of the minor children, as described in the following pages, **OR**

- ☐ **2. SOLE LEGAL DECISION-MAKING (CUSTODY) REQUESTED BY THE PARENT SUBMITTING THIS PLAN.** The parents cannot agree to the terms of legal decision making (custody) and parenting time. The parent submitting this Plan asks the court to order sole legal decision-making authority and parenting time according to this Plan,

(Optional, if you marked 1 or 2 above)

- ☐ **RESTRICTED, SUPERVISED, OR NO PARENTING TIME.**

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

OR

- ☐ **3. JOINT LEGAL DECISION-MAKING (CUSTODY) BY AGREEMENT.** The parents agree to joint legal decision-making (custody) and request the court to approve the joint legal decision-making (custody) arrangement as described in this Plan. Primary physical custody will be with the ☐ Mother ☐ Father, **OR**
- ☐ **4. JOINT LEGAL DECISION-MAKING AUTHORITY (CUSTODY) REQUESTED BY THE PARENT SUBMITTING THIS PLAN.** The parents cannot agree to the terms of legal decision making and parenting time or are unable to submit this plan together at this time. My request for joint legal decision-making authority is deferred for the court's determination.

PART 2: PHYSICAL CUSTODY AND PARENTING TIME. Complete each section below. Be specific about what you want the judge to approve in the court order.

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

- ☐ The minor children will be in the care of Father as follows: (Explain).

- ☐ The minor children will be in the care of Mother as follows: (Explain).

- ☐ Other physical custody arrangements are as follows: (Explain).

- ☐ Transportation will be provided as follows:
☐ Mother or ☐ Father will pick the minor children up at _____ o'clock.
☐ Mother or ☐ Father will drop the minor children off at _____ o'clock.
 Parents may change their time-share arrangements by mutual agreement with at least ____ days notice in advance to the other parent.

- B. SUMMER MONTHS OR SCHOOL BREAK LONGER THAN 4 DAYS:** The weekday and weekend schedule described above will apply for all 12 calendar months **EXCEPT:**
- ☐ During summer months or school breaks that last longer than 4 days, no changes shall be made.
- OR,**
- ☐ During summer months or school breaks that last longer than 4 days, the minor children will be in the care of Father: (Explain)
-
- ☐ During summer months or school breaks that last longer than 4 days, the minor children will be in the care of Mother: (Explain)
-
- ☐ Each parent is entitled to a _____ week period of vacation time with the minor children. The parents will work out the details of the vacation at least _____ days in advance.

C. TRAVEL

- ☐ Should either parent travel out of the area with the minor children, each parent will keep the other parent informed of travel plans, address(es), and telephone number(s) at which that parent and the minor children can be reached.
- ☐ Neither parent shall travel with the minor children outside Arizona for longer than _____ days without the prior written consent of the other parent or order of the court.

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

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

☐ **Mother's Day** will be celebrated with the Mother every year

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

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

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

☐ **Other Holidays** (Describe the other holidays and the arrangement) :

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

☐ **Other** (Explain) :

- E. PARENTAL ACCESS TO RECORDS AND INFORMATION:** Under Arizona law (A.R.S. §25-403.06), unless otherwise provided by court order or law, on reasonable request, both parents are entitled to have equal access to documents and other information concerning the minor children's education and physical, mental, moral and emotional health including medical, school, police, court and other records. A person who does not comply with a reasonable request for these records shall reimburse the requesting parent for court costs and attorney fees incurred by that parent to make the other parent obey this request. A parent who attempts to restrict the release of documents or information by the custodian of the records without a prior court order is subject to legal sanctions.

F. EDUCATIONAL ARRANGEMENTS:

- ☐ Both parents have the right to participate in school conferences, events and activities, and the right to consult with teachers and other school personnel.
- ☐ Both parents will make major educational decisions together.
(optional) ☐ If the parents do not reach agreement, then: _____

OR

- ☐ Major educational decisions will be made by ☐ Mother ☐ Father after consulting other parent.

G. MEDICAL AND DENTAL ARRANGEMENTS:

- ☐ Both parents have the right to authorize emergency medical treatment, if needed, and the right to consult with physicians and other medical practitioners. Both parents agree to advise the other parent immediately of any emergency medical/dental care sought for the minor children, to cooperate on health matters concerning the children and to keep one another reasonably informed. Both parents agree to keep each other informed as to names, addresses and telephone numbers of all medical/dental care providers.
- ☐ Both parents will make major medical decisions together, except for emergency situations as noted above. (optional) ☐ If the parents do not reach an agreement, then: _____

OR

- ☐ Major medical/dental decisions will be made by ☐ Mother ☐ Father after consulting other parent.

H. RELIGIOUS EDUCATION ARRANGEMENTS: (Choose ONE)

- ☐ Each parent may take the minor children to a church or place of worship of his or her choice during the time that the minor children is/are in his or her care.
- ☐ Both parents agree that the minor children may be instructed in the _____ faith.
- ☐ Both parents agree that religious arrangements are not applicable to this plan.

I. ADDITIONAL ARRANGEMENTS AND COMMENTS:

- ☐ **NOTIFY OTHER PARENT OF ADDRESS CHANGE.** Each parent will inform the other parent of any change of address and/or phone number in advance **OR** within _____ days of the change.
- ☐ **NOTIFY OTHER PARENT OF EMERGENCY.** Both parents agree that each parent will promptly inform the other parent of any emergency or other important event that involves the minor children
- ☐ **TALK TO OTHER PARENT ABOUT EXTRA ACTIVITIES.** Each parent will consult and agree with the other parent regarding any extra activity that affects the minor children's access to the other parent.
- ☐ **ASK OTHER PARENT IF HE/SHE WANTS TO TAKE CARE OF CHILDREN.** Each parent agrees to consider the other parent as care-provider for the minor children before making other arrangements.
- ☐ **OBTAIN WRITTEN CONSENT BEFORE MOVING.** Neither parent will move with the minor children out of the Phoenix metropolitan area without prior written consent of the other parent, or a court ordered Parenting Plan. **A.R.S. 25-408 (B)**
- ☐ **COMMUNICATE.** Each parent agrees that all communications regarding the minor children will be between the parents and that they will **not** use the minor children to convey information or to set up parenting time changes.

- ☐ **METHOD OF COMMUNICATION.** Each parent agrees to use the following means of communication: _____.
- ☐ **FREQUENCY OF COMMUNICATION.** Each parent agrees to communicate regarding the child(ren) on a regular basis. That communication schedule will be: _____ and will be by the following methods: ☐ Phone ☐ Email ☐ Other
- ☐ **PRAISE OTHER PARENT.** Each parent agrees to encourage love and respect between the minor children and the other parent, and neither parent shall do anything that may hurt the other parent's relationship with the minor children
- ☐ **COOPERATE AND WORK TOGETHER.** Both parents agree to exert their best efforts to work cooperatively in future plans consistent with the best interests of the minor children and to amicably resolve such disputes as may arise.
- ☐ **NOTIFY OTHER PARENT OF PROBLEMS WITH TIME-SHARING AHEAD OF TIME.** If either parent is unable to follow through with the time-sharing arrangements involving the minor child(ren), that parent will notify the other parent as soon as possible.
- ☐ **PARENTING PLAN.** Both parents agree that if either parent moves out of the area and returns later, they will use the most recent **"Parenting Plan/Access Agreement"** in place before the move.
- ☐ **MEDIATION.** If the parents are unable to reach a mutual agreement regarding a legal change to their parenting orders, they may request mediation through the court or a private mediator of their choice.

NOTICE: DO NOT DEVIATE FROM PLAN UNTIL DISPUTE IS RESOLVED.

Both parents are advised that while a dispute is being resolved, neither parent shall deviate from this Parenting Plan, or act in such a way that is inconsistent with the terms of this agreement.

Once this Plan has been made an order of the Court, if either parent disobeys the court order related to parenting time with the children, the other parent may submit court papers to request enforcement. See the Self-Service Center packets **"To Make Someone Obey a Court Order"** for help.

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

Signature of Mother: _____

Date: _____

Signature of Father: _____

Date: _____

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

According to A.R.S. §25-403.05, a child's parent or custodian must immediately notify the other parent or custodian if the person knows that a convicted or registered sex offender or someone who has been convicted of a dangerous 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 exhibition of a deadly weapon or dangerous instrument.
- (c) Sexual assault.
- (d) Molestation of a child.
- (e) Sexual conduct with a minor.
- (f) Commercial sexual exploitation of a minor.
- (g) Sexual exploitation of a minor.
- (h) Child abuse as prescribed in section 13-3623, subsection A, paragraph 1.
- (i) Kidnapping.
- (j) Sexual abuse.
- (k) Taking a child for the purpose of prostitution as prescribed in section 13-3206.
- (l) Child prostitution as prescribed in section 13-3212.
- (m) Involving or using minors in drug offenses.
- (n) Continuous sexual abuse of a child.
- (o) Attempted first degree murder.
- (p) Sex trafficking.
- (q) Manufacturing methamphetamine under circumstances that cause physical injury to a minor.
- (r) Bestiality as prescribed in section 13-1411, subsection A, paragraph 2.
- (s) Luring a minor for sexual exploitation.
- (t) Aggravated luring a minor for sexual exploitation.
- (u) Unlawful age misrepresentation.

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

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

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

Signature of Mother: _____

Date: _____

Signature of Father: _____

Date: _____

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

- A. DOMESTIC VIOLENCE:** Arizona Law (A.R.S. § 25-403.03) states that joint legal decision-making authority (custody) shall NOT be awarded if there has been “a history of significant domestic violence”.
- ☐ Domestic Violence has **not** occurred between the parties, **OR**
- ☐ Domestic Violence **has** occurred but it has not been “significant” or has been committed by both parties.*
- B. DUI or DRUG CONVICTIONS:**
- ☐ Neither party has been convicted of driving under the influence or a drug offense within the past 12 months, **OR**
- ☐ One of the parties **HAS** been convicted of driving under the influence or a drug offense within the past 12 months but the parties feel Joint Legal Decision-Making (Custody) is in the best interest of the children.*

*** IF THERE HAS BEEN DOMESTIC VIOLENCE OR A DUI OR DRUG CONVICTION:** Attach an extra page explaining why Joint Legal Decision-Making (Custody) is still in the best interest of the children.

- C. JOINT LEGAL DECISION MAKING (CUSTODY) AGREEMENT:** If the parents have agreed to joint legal decision making (custody), the following will apply, subject to approval by the Judge:
1. **REVIEW:** The parents agree to review the terms of this agreement and make any necessary or desired changes every _____ months from the date of this document.
 2. **CRITERIA.** Our joint legal decision making (custody) agreement meets the criteria required by Arizona law A.R.S. § 25-403.02, as listed below:
 - a. The best interests 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 practical schedule of the parenting time for the minor children, including holidays and school vacations is included in the Plan;
 - d. A procedure for the exchange(s) of the child(ren) including location and responsibility for transportation.
 - e. The Plan includes a procedure for periodic review;
 - f. The Plan includes a procedure by which proposed changes, disputes and alleged breaches may be mediated or resolved
 - g. A procedure for communicating with each other about the child, including methods and frequency.

PART 4 SIGNATURES OF BOTH PARENTS REQUESTING JOINT LEGAL DECISION MAKING AUTHORITY (CUSTODY)

(as instructed on page 1)

Signature of Mother: _____

Date: _____

Signature of Father: _____

Date: _____

(1) Name of Person Filing : _____
Phone Number(s): _____ / _____
In this case I am ☐ Petitioner or ☐ Respondent Or ☐ represented by Attorney
(IF) Attorney, Name: _____ Bar No.: _____
Atty. Email: _____ Atty. Phone: _____

For Clerk's Use Only

**SUPERIOR COURT OF ARIZONA
IN MARICOPA(2) COUNTY**

PARENT'S WORKSHEET FOR CHILD SUPPORT

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

(3) Respondent _____ (4) ATLAS _____

(5) Total Number of Children: _____

(6) Parent with Primary Legal Decision-Making Authority
(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).

	FATHER	MOTHER
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

CURRENT EMPLOYER* INFORMATION

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

<http://www.familysupportcenter.maricopa.gov>

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	_____
AG	_____
	SUB _____
	DCSE _____

FOR CLERK'S USE ONLY

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

(1) _____
Petitioner in Original Case

(3) Case No. _____

(2) _____
Respondent in Original Case

(4) ATLAS No. _____

**ORDER STOPPING INCOME
WITHHOLDING ORDER (AND ALL
MARICOPA 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 Maricopa 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