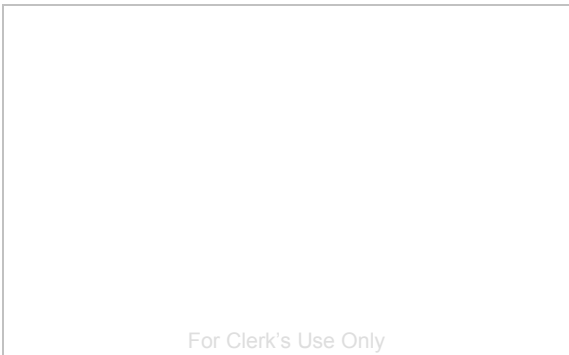


Name: _____
Mailing Address: _____

Daytime Telephone _____
Representing Self, Without a Lawyer



IN THE SUPERIOR COURT OF ARIZONA, YAVAPAI COUNTY

Regarding the matter of _____
1300DO

Petitioner

ATLAS #: _____

and

REQUEST TO STOP
 ORDER OF ASSIGNMENT
 INCOME WITHHOLDING ORDER

Respondent

**THIS FORM DOES NOT AFFECT YOUR EXISTING SUPPORT ORDER.
THIS FORM ONLY APPLIES TO THE ORDER OF ASSIGNMENT/INCOME WITHHOLDING
ORDER.**

I, _____, ask the court to Stop the Order of Assignment
 Income Withholding Order dated _____, because:

- All past-due amounts and interest have been paid and the person required to pay **child support** is no longer obligated to pay child support because:
 - Child is 18 and not attending high school or a certified high school equivalency program
 - Child(ren) has/have been adopted and all past-due amounts have been paid. **(I have attached a copy of the Adoption Order)**
 - Child(ren) is/are deceased. **(I have attached a copy of the child's Death Certificate.)**
 - Child is 19.
 - Child is married.
- Child legal decision-making has been changed by order of this Court.
- All past-due amounts have been paid and the person required to pay **spousal support** is no longer obligated to pay spousal support;
- The parties have reconciled and remarried **(I have attached a copy of the Marriage Certificate), AND/OR** the court case that ordered the support payment(s) has been dismissed.
- The person ordered to pay support is deceased. **(I have attached a copy of the Death Certificate)**
- There are multiple active Orders of Assignment/Income Withholding Orders for the same child(ren) and/or spouse-this case number and case number(s) _____ **(certified copy of order attached if from another Court);**

I REQUEST THE COURT to order the Support Payment Clearinghouse to hold any payments received on this CHILD SUPPORT SPOUSAL SUPPORT obligation until after the hearing on:
 Current support payments Past due payments

Date

Requesting Party

STATE OF ARIZONA)
County of _____) ss.

SUBSCRIBED AND SWORN or affirmed before me this date _____, 20____,
By _____.

My Commission Expires:

Notary Public