

**PETITION TO MODIFY  
PARENTING TIME  
(VISITATION)  
and CHILD SUPPORT**

**1**

**To Change an  
Existing Court Order for  
Parenting Time  
and Child Support  
When Parties Do Not Agree  
Filing the Court Papers  
(Forms Packet)**

**NOTICE:** This process requires calculation of child support. To calculate child support, you may use the online calculator through ezcourtforms, the packet titled “**C17**”, or you may make an appointment with the Clerk of Court to calculate support for you for a fee.

## SELF-SERVICE CENTER

# HELPFUL INFORMATION ON GETTING A CHANGE OF PARENTING TIME and CHILD SUPPORT

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

### 1. WHEN CAN YOU FILE FOR A CHANGE OF PARENTING TIME?

- There have been significant changes in circumstances that make a change in parenting time necessary for the good of the minor child(ren), **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.
- There is reason to believe that the minor child(ren)'s current environment may seriously endanger the minor child(ren)'s physical, mental, moral or emotional health and your minor child(ren) is/are at risk.

**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 is 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 child support, *and* a petition for ***Temporary Orders*** (of Custody or Parenting Time) ***Without Advance Notice to the Other Party*** (formerly known as an "emergency orders") as soon as possible. All forms are available through the Self-Service Center.

### 2. THINGS TO CONSIDER BEFORE FILING A CHANGE OF PARENTING TIME:

- A.** Filing for a change of parenting time is a serious matter and generally should be considered as a **last resort**. Raising the minor child(ren) in two households, arranging for parenting time, and making joint decisions about the 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. 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 parenting time and child support, you must convince the judge through appropriate evidence, that the best interests of the minor child(ren) requires the change. The judge usually will not make a change 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**. You must show that the

change or situation has a **substantial effect** on the child(ren)'s well-being. Judges generally do **not** want to put the minor child(ren) through another serious change in surroundings, unless he/she is convinced it is necessary for the minor child(ren)'s welfare. In addition, if you have reasonable parenting time and the minor child(ren) is/are being neglected or abused during parenting time, then you may want to request that parenting time be supervised or consider asking for a change of custody.

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(ren) relate(s) to parents, brothers and sisters;
- how the minor child(ren) is/are 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(ren);
- which parent has provided the primary care to the minor child(ren); and
- evidence of what a parent has done to convince the other parent to make a custody agreement.

The court will consider domestic violence against you, the minor child(ren), or another person in the minor child(ren)'s presence to be a serious consideration in deciding whether 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 PARENTING TIME** A change of parenting time has several special requirements that you should understand before you begin.

**Tip #1:** Whenever possible, try to solve your parenting time 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:** Be sure that the changes in circumstances that caused you to request the change of parenting time are **important** and **related to issues** of your minor child(ren)'s long term best interest. Be sure that if you are making allegations of abuse or neglect, that you have witnesses or evidence to back up your statements.

**Tip #3:** If your minor child(ren) has/have been **seriously hurt or physically abused**, contact the appropriate authorities and file a petition to **"Petition to Modify"** (Change) Custody and/or Parenting time along with a motion for **"Temporary Modification of Custody or Parenting Time Without Advance Notice to the Other Party"** (formerly known as an "emergency modification") to get the minor child(ren) out of the dangerous environment as soon as possible. These forms are available for purchase at the Self-Service Center or may be downloaded for free from the Self-Service Center's web site.

**NOTE: The COURT may modify child support as appropriate after modification of parenting time.**

## SELF-SERVICE CENTER

# INSTRUCTIONS FOR FILLING OUT THE “PETITION TO MODIFY 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 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, you do not need to put your address and phone number on your court papers. 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 parenting time. You will need to have a copy of your current 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**, the person filing this petition for modification. If your address is protected by court order, write “protected” 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, Case Number and ATLAS Number (if there is one), exactly as it appears on your original Maricopa County court case where custody or parenting time/visitation was originally ordered.

### GENERAL INFORMATION:

- 1. Information about Me (the person filing this petition for modification):** Fill in your name, address (if not protected) and how you are related to the minor children.
- 2. Information about the Other Parent:** If you, the person filing this petition for modification, are one of the parents, fill in the other parent’s name, address (if not protected) including city, state and zip code and check the box to indicate whether mother or father. If you are not one of the parents, use this space to enter the information about one of the parents, then list the information about the other parent under “Information about Other Parent or Other Party”, below.

**Information about the Other Parent or Other Party:** Leave blank if the two parents are the **only parties to this case**. If there is a non-parent party *other than* the person listed in (1), enter the information about that person. Check the box to indicate that person is “other” than the father or mother, and explain that person’s relationship to the minor child(ren) in the space provided. For example: Other: grandmother or guardian or sister (etc.)

- 3. Information about the minor children for whom I want the 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 parenting time and child support. If there are more than four minor children, check the box and attach a separate sheet titled the same as indicated on the Petition (and as shown above) listing the same information as requested in this section (name, date of birth and age) for each minor child.
- 4. Affidavit regarding Minor Children.** Check the box to indicate whether the **minor** children have resided in Arizona since the entry of the last Arizona court order. **If not**, you must check the second box, and include a completed “**Affidavit Regarding Minor Children**”, which is included in the #1 “Forms” packet for this procedure.

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.** Tell the court whether "significant domestic violence" has occurred. If in your judgment it has, explain to the court.
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). You are encouraged to be BRIEF and to keep your explanation within the space provided, *but if you need more room*, you may write "see attachment" on the Petition, title your extra page "**Why the Decree/Order should be changed**", finish your explanation and attach the extra page 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 parenting time to say.

**A. PARENTING TIME:**

Mark one box only. You can ask that the non-custodial parent (the parent having physical custody of the minor child(ren) less than 50% of the time) or other non-parent party have one of the following types of parenting time ("visitation" if to non-parent):

1. **Reasonable Parenting Time**--This suggests an amount of parenting time appropriate to the age of the child.
2. **Reasonable Parenting Time according** to the attached "**Parenting Plan**" (or *similarly detailed plan or agreement of the parties*). 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 (or Supervised "Visitation", to Other [non-parent] Party).** You should request supervised parenting time if the non-custodial parent or other party cannot adequately care for the minor child(ren) 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 children.

4. **No Parenting Time to Other Parent.** You should mark the box for “No Parenting Time” to a parent **only** if that parent has seriously harmed, abused, or is otherwise a serious danger to the child(ren)’s physical and emotional health, or if there is a criminal court order stating there is to be no contact between the minor child(ren) and the non-custodial parent. This is a last resort to protect the minor child(ren). Explain.

**OR**

**No Parenting Time (visitation) to Other** (non-parent). Mark this box if there is a non-parent, third party in this case and you do not want that person to have court-ordered visitation.

If there is a 3<sup>rd</sup> (third) party in addition to the parents in this case, use the second set of identical parenting time choices contained in this section to indicate who the remaining party is (Mother, Father or Other party), and your preferences for the type of parenting time or visitation this person should have.

**If you selected #3 or #4, you must write the reasons why parenting time (or visitation, if to non-parent) should be supervised or why that person should have no parenting time or visitation at all.**

**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.
- 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 TO DO NEXT:** Follow the instructions in the document called **“Procedures: What to do After You Have Completed the “Petition to Change Parenting Time and Child Support”**”.

## SELF-SERVICE CENTER

# PROCEDURES: WHAT TO DO AFTER YOU HAVE COMPLETED THE “PETITION TO MODIFY PARENTING TIME and CHILD SUPPORT”

1. Complete all the paperwork:

- “**Petition to Modify Parenting Time and Child Support**”
- “**Order to Appear.**” Fill the name of Petitioner and Respondent, the Case Number and ATLAS number (if any). Leave the rest of the form blank for the Judge to fill in.
- “**Affidavit Regarding Minor Children.**” Only required **when the minor children have resided outside the state of Arizona** at some time since the date of the last custody order.
- “**Child Support Worksheet**” (also known as “**Parents Worksheet for Child Support**”) (You may use the free online child support calculator to produce this form.)
- “**Current Employer Information Sheet**”

2. **Make copies and file the papers with the Clerk of the 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 and 4** on next page for more information on serving notice on the State.

**Separate your documents into 4 sets (5, if DES or DCSE is involved)**

<b>Set 1: Originals for the Clerk of the Court:</b> <b>Petition to Modify</b> <b>Affidavit Regarding Minor Children</b> (if applicable) <b>Child Support Worksheet</b> <b>Current Employer Information Sheet</b>	<b>Set 3: Copies for you:</b> <b>Petition to Modify</b> <b>Affidavit Regarding Minor Children</b> (if applicable) <b>Child Support Worksheet</b>
<b>Set 2: Copies for the Judge:</b> (with 1 <i>original</i> Order to Appear as noted below) <b>Petition to Modify</b> <b>Affidavit Regarding Minor Children</b> (if applicable) <b>Child Support Worksheet</b> <b>Order to Appear</b> (Original <u>and</u> 2 copies) <b>1 Self-Addressed, Stamped Envelope</b> (to be mailed back to you by the Judge’s staff)	<b>Set 4: Copies for Other Party:</b> <b>Petition to Modify</b> <b>Order to Appear</b> <b>Affidavit Regarding Minor Children</b> (if applicable) <b>Child Support Worksheet</b>
<b>* Set 5 for the Attorney General’s Office (<u>only if required</u> – see Step 3 and 4 on next page)</b> <b>Petition to Modify</b> <b>Order to Appear</b> <b>Child Support Worksheet</b> <b>Affidavit Regarding Minor Children (if applicable)</b> <b>Acceptance of Service</b> (original) and 1 self-addressed stamped envelope (addressed back to you)	

3. **GO TO THE CLERK OF COURT FILING COUNTER TO FILE YOUR PAPERS.** You may file your papers from 8 a.m. to 5 p.m., Monday through Friday, at the following Superior Court locations:

**GRAHAM COUNTY CLERK OF THE COURT  
800 WEST MAIN STREET  
SAFFORD, AZ 85546**

Hand the originals and all sets of copies (**except the “Order to Appear”**) to the Clerk at the filing counter **and pay the filing fee**. The Clerk will keep the originals, stamp the extra copies to show that these are copies of papers you have filed with the Court, and return the stamped copies to you. The stamped sets of copies are now called "conformed" copies.

**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 Set” of papers which includes the **Order to Appear**.

**GRAHAM COUNTY CLERK OF THE COURT  
800 WEST MAIN STREET  
SAFFORD, AZ 85546**

- **Make sure you include a self-addressed envelope with enough postage** so the **Order to Appear** may be mailed to you.
  - **If the Judge decides to hear your case**, the original and 2 copies of the **Order to Appear** listing the date, time, and location of your hearing will be mailed to you using the envelope you provided.
  - **Wait two weeks to hear back.** If you have not by then received the completed **Order to Appear** or other document from the Judge, contact Family Court Administration at **(602) 506-1561** to inquire.
4. **Serve the papers on the other party (ies).** If the Judge decided to set a hearing, you must arrange for service (delivery by a court-approved method) of the following papers on the other party:
- A copy of the **“Petition to Modify Parenting Time and Child Support.”**
  - A copy of the **“Order to Appear”** (signed by the Judge).
  - A copy of your **“Child Support Worksheet.”**
  - A copy of the **“Affidavit Regarding Minor Children”** (if required, as explained in #1, above)

**IS THE STATE OF ARIZONA A PARTY TO YOUR CASE?** 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 (the “AG”).

**SERVING PAPERS ON THE STATE:** *(if required)*. The Attorney General 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 of Service, 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 Child Support**",
- a copy of the "**Parents Worksheet for Child Support**", along with an
- "**Acceptance of Service**" form, AND
- a self-addressed, stamped envelope (*addressed back to you*).

A list of addresses for the regional AG's offices is available from the Self-Service Center or from the Internet.

(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!**

5. Go to the court hearing and bring the Court Order papers.

- Write down the date, time and location.
- Attend • Be On Time • Dress Neatly • Do NOT Bring Children to Court.

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 (in original case)

Case Number: \_\_\_\_\_

### PETITION TO MODIFY CHILD PARENTING TIME or PARENTING TIME AND CHILD SUPPORT

\_\_\_\_\_  
Name of Respondent (in original case)

I, \_\_\_\_\_ am the ☐ Petitioner or ☐ Respondent or ☐ Other Party  
(print your name) and make the following statements to the Court:

### GENERAL INFORMATION:

#### 1. Information about Me, the person filing (requesting) this modification:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

How I am related to minor child(ren) for whom the PARENTING TIME order should be changed:

☐ Mother or ☐ Father or ☐ Other: (explain) \_\_\_\_\_

#### 2. Information about Other Parent: (if the person filing this modification is one of the parents.) (If someone *other than* one of the parents is filing this request, then list the information about one of the parents, then the information about the other parent below.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

How *this party* is related to minor child(ren) for whom the PARENTING TIME order should be changed:

☐ Mother or ☐ Father

**Information about the Other Parent or Other Party** (if there is a non-parent involved the case *other than* the person whose information has already been listed in (1) above):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

How *this party* is related to minor child(ren) for whom the PARENTING TIME order should be changed:

☐ **Mother** or ☐ **Father** or ☐ **Other:** (explain) \_\_\_\_\_

**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: \_\_\_\_\_

☐ **There are more than four (4) minor children. I have attached a separate page titled "Information about the minor children for whom I want the Order Changed", listing this same information for all.**

**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: \_\_\_\_\_ (Name of County)

Located in this State: \_\_\_\_\_ (Name of 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 Graham County case number.

**WHAT YOUR 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.** ☐ 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 parenting time is in the best interest of the minor 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 (change) 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. **PARENTING TIME** to the ☐ **Mother** or ☐ **Father** or ☐ **Other** (non-parent)

1. ☐ **Reasonable parenting time** to the parent/party who does not have custody according to the Maricopa County Parent/Child Parenting Time Guidelines; **OR**
2. ☐ **Reasonable parenting time** to the parent/party who does not have 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** or ☐ **Other**  
Supervised parenting time or no parenting time is requested for the following reasons:

---



---



---

(**Only** use this section below if needed because there is a 3<sup>rd</sup> (third) party *in addition to* the parents involved in this case) **PARENTING TIME** to the ☐ **Mother** or ☐ **Father** or ☐ **Other** (“visitation” if to non-parent) **as follows:**

1. ☐ **Reasonable parenting time** to the parent/party who does not have custody according to the Maricopa County Parenting Time Guidelines; **OR**
2. ☐ **Reasonable parenting time** to the parent/party who does not have 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** or ☐ **Other**  
Supervised parenting time or no parenting time is requested for the following reasons:

---



---



---

The costs of travel related to parenting time/visitation over 100 miles one way shall be shared as follows:  
**Mother** \_\_\_\_\_ % **Father** \_\_\_\_\_ %

**B. CHILD SUPPORT.** ☐ **Mother** or ☐ **Father** should pay child support to ☐ **Mother** or ☐ **Father** or ☐ to **Other** party 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 minor child(ren) support payments should be made through the Support Payment Clearinghouse, and will be subject to an applicable statutory fee through an automatic Order of Assignment.

**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.

Mother and Father will pay for all reasonable unreimbursed medical, dental, and health-related expenses incurred for the minor child(ren) in proportion to their respective incomes.

**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 minor child.

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

---



---



---



---

**F. 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: (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<sup>(2)</sup>  
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><b>FATHER</b></u>	<u><b>MOTHER</b></u>
<b>Gross Income</b> (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)	\$ -
<b>Adjusted Gross Income</b>	\$ _____ (14)	\$ _____
Combined Adjusted Gross Income	(15) \$ _____	
<b>Basic Child Support Obligation</b>	(16) \$ _____	
<b>Plus Costs for:</b>		
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)	\$ _____
<b>Adjustment for Non Custodial Parent's Costs Associated with Parenting Time</b>			
Using Table A <input type="checkbox"/> Table B <input type="checkbox"/>	\$ _____	(26)	\$ _____
No. of Days _____ = _____% Adjustment (from table)			
x Line (16) \$ _____ (Basic Child Support Obligation)	\$ _____	(27)	\$ _____
<b>Less Noncustodial Parent's Costs for:</b>			
Medical/Dental/Vision Insurance*	\$ _____	(28)	\$ _____
Childcare*	\$ _____	(29)	\$ _____
Education Expenses*	\$ _____	(30)	\$ _____
Extraordinary/Special Needs Child Expenses*	\$ _____	(31)	\$ _____
*Subtract here <u>ONLY</u> if ADDED-IN items 17-20 above			
Adjustments Subtotal	\$ _____	(32)	\$ _____
Preliminary Child Support Amount	\$ _____	(33)	\$ _____
<b>Self Support Reserve Test for Parent Who Will Pay</b>			
Amount from Line (14) _____ (Adj. Gross Inc.)			
Minus Reserve Amount <b>- \$903.00</b>			
Total	= \$ _____	(34)	\$ _____
Child Support to be Paid by: Father <input type="checkbox"/> Mother <input type="checkbox"/>	\$ <span style="border: 1px solid black; padding: 2px 20px;"> </span>	(35)	\$ <span style="border: 1px solid black; padding: 2px 20px;"> </span>
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

Respondent's Name or Lawyer's Name: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
ATLAS Number: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

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

## SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

\_\_\_\_\_  
Name of Petitioner (in original case)

Case Number \_\_\_\_\_

ATLAS Number \_\_\_\_\_

\_\_\_\_\_  
Name of Respondent (in original case)

### ORDER TO APPEAR REGARDING PETITION TO MODIFY PARENTING TIME or PARENTING TIME AND CHILD SUPPORT

This is an important Court Order that affects your rights. Read this Order carefully. If you do not understand this Order, contact a lawyer for legal advice.

Based on the *"Petition to Modify Parenting Time and Child Support,"* and pursuant to Arizona law,

### IT IS ORDERED THAT YOU

(Names) \_\_\_\_\_

appear at the time and place stated below so the Court can determine whether the Petition should be granted.

NAME OF JUDICIAL OFFICER: \_\_\_\_\_

DATE AND TIME OF HEARING: \_\_\_\_\_

PLACE OF HEARING: Graham County Superior Court

ADDRESS: 800 W. Main St.

Safford, Az 85546

**AMOUNT OF TIME FOR HEARING:** This is a 15 minute proceeding with the court. The court will determine if more time is needed. All parties, whether represented by attorneys or not, **must** be present. If there is a failure to appear, the court may make such orders as are just, including granting the relief requested by the party who **does** appear. If the petition seeks to establish, modify or enforce child support, and you fail to appear as ordered, a child support arrest warrant may be issued for your arrest.

2. That a true copy of this ***“Order to Appear”*** and a true copy of the Petition, Affidavits, and related documents filed with the Petition shall be served by process server or sheriff by the moving party on the responding party no later than \_\_\_\_\_, and in accordance with Rule 40-43, and 47, Arizona Rules of Family Law Procedure.
3. The responding party may file a ***“Response and Opposing Affidavit(s)”*** by \_\_\_\_\_ (date). Copies of the ***“Response and Opposing Affidavit(s)”*** **must** be served on the moving party or if the moving party is represented by an attorney, on the attorney, by mail or otherwise in accordance with Rule 43, Arizona Rules of Family Law Procedure.
4. 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 ten (10) judicial days before your scheduled court date.
5. Requests for an interpreter for persons with limited English proficiency must be made to the office of the judge or commissioner assigned to the case at least ten (10) judicial days in advance of your scheduled court date.

DONE IN OPEN COURT: \_\_\_\_\_.

\_\_\_\_\_  
**Judge/Commissioner of the Superior Court**

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