

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 MARICOPA COUNTY

(2) \_\_\_\_\_  
Petitioner in original case

(3) Case No. \_\_\_\_\_

(4) ATLAS No. \_\_\_\_\_

(2) \_\_\_\_\_  
Respondent in original case

### AGREEMENT TO STOP INCOME WITHHOLDING ORDER (and ALL MARICOPA COUNTY SUPPORT ORDERS) A.R.S. § 25-504

**Note: If any current or past due child support or spousal maintenance payments are still owed, STOP! You have the wrong form. Review the forms to MODIFY the Income Withholding Order to see if appropriate for your situation.**

The parties **agree** that all child support and spousal maintenance payments by the person ordered to make payments in this Case Number have been fully paid, or, to the extent any such payments have not been fully paid, the person entitled to receive payment expressly waives the other person's obligation to pay any unpaid payments. The parties further agree that the **"Income Withholding Order"** should be stopped immediately, and that all monies in possession of the Support Payment Clearinghouse upon receipt of an **"Order Stopping Income Withholding Order" and Terminating All Support Obligations** shall be returned to the person ordered to make payments. The parties are signing this Agreement of their own free will and not under any fear or threat of force. This Agreement will forever end all child support orders, spousal maintenance orders and **"Income Withholding Order"** previously issued in this case.

I, (5) \_\_\_\_\_, the person ordered to make payments, and

I, (5) \_\_\_\_\_, the person receiving payments, ask the Court to terminate the following **"Income Withholding Order"** (Order requiring an employer to withhold wages for child support or spousal maintenance):

**"Income Withholding Order" issued: (6)** \_\_\_\_\_ (Month/Day/Year)

The **"Income Withholding Order"** was issued by: \_\_\_\_\_ (Name of Court)

Located in this County: \_\_\_\_\_ (Name of County)

Located in this State: \_\_\_\_\_ (Name of State)

The parties also ask the Court to terminate any underlying *Maricopa County* child support or spousal maintenance (Support Orders).

Child Support Order issued: **(7)** \_\_\_\_\_ (Month/Day/Year)

The Support Order was issued by: \_\_\_\_\_ (Name of Court)

Located in this County: \_\_\_\_\_ (Name of County)

Located in this State: \_\_\_\_\_ (Name of State)

Spousal Maintenance Order issued: **(8)** \_\_\_\_\_ (Month/Day/Year)

The Support Order was issued by: \_\_\_\_\_ (Name of Court)

Located in this County: \_\_\_\_\_ (Name of County)

Located in this State: \_\_\_\_\_ (Name of State)

**(9)** The **“Income Withholding Order”** should be stopped and any *Maricopa County Support Orders* should be terminated **because:** Check the appropriate box(es) to explain why both Order(s) should be terminated.

**(a)** All past due child support (back child support/arrearages/interest) has been paid and the person making payments is no longer obligated to pay current child support because all children named in the Child Support Order:

- 1. are **18 and not attending high school** or a certified equivalency program, and / or
- 2. are **19**, and / or
- 3. have been **adopted**, and / or
- 4. are **married**, and / or
- 5. are **deceased**.

All past due spousal maintenance (alimony arrearages/interest) has been paid/satisfied and the person making payments is no longer required to pay spousal maintenance.

Legal decision making (child custody) has been changed by Order of this Court.

We are remarried to each other. Copy of marriage license is attached.

Case has been dismissed. Order of Dismissal is attached if not from this Court.

Other condition for ending payments listed in the underlying support order has occurred. Describe:

\_\_\_\_\_

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

### 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.

#### SIGNATURES

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Respondent's Signature

STATE OF \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to or affirmed before me this:  
\_\_\_\_\_  
(date)

Subscribed and sworn to or affirmed before me this:  
\_\_\_\_\_  
(date)

By \_\_\_\_\_.

By \_\_\_\_\_.

\_\_\_\_\_  
Deputy Clerk or Notary Public  
(notary seal)

\_\_\_\_\_  
Deputy Clerk or Notary Public  
(notary seal)

**If the State of Arizona (DES) is a party to your case, a representative of DES or its Division of Child Support Enforcement (DCSE) must also sign this form before you file. (See Instructions)**

\_\_\_\_\_  
Signature of DES/DCSE representative

\_\_\_\_\_  
Date