

PETITION TO MODIFY CHILD SUPPORT “Simplified Mod”

1

**To Change an Existing Court Order
15% or more (Increase OR Decrease)
OR**

**To Assign or Change Responsibility for
Medical Insurance**

Part 1: Filing the Court Papers

(Forms and Instructions)

LAW LIBRARY RESOURCE CENTER

Petition to modify child support – simplified process ("Simplified Mod")

CHECKLIST

You may use this packet if the following factors apply to your situation:

- ✓ You have a Maricopa County child support order and you believe the amount you pay or receive should be changed, AND
- ✓ You have completed a "*Child Support Worksheet*" and the result for "Child Support Obligation" (last line from the online version or item 35 from the paper worksheet) is different from the amount of your current order by *at least 15%*, OR
- ✓ You want to assign responsibility or change who is responsible for medical insurance. A modification of the medical assignment or responsibility does not need to vary by 15% or more from the existing child support amount.

Typically, this procedure is used when there has been a change in the income of the parent(s),

OR

There are two or more children and support is no longer owed for one child but *is* still owed for others.

WARNING: If the order you want to change is not from this county, ask a lawyer about the requirements to file your Petition (Request) with this Court.

DO NOT USE THESE FORMS:

- ✗ To change spousal support/maintenance (alimony);
- ✗ If your order is from a court outside this county (unless an attorney has advised you to);
- ✗ If the amount of the change in the order is not *at least 15%*;
- ✗ If the reason you are requesting the change is because the living arrangements of the child(ren) have changed but the court order about legal decision making (custody) and visitation has *not*.

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 Law Library Resource Center website.

Petition to modify a court order for child support Simplified Process

PART 1: Filing the court papers

This packet contains court forms and instructions to file a “*Petition to Modify Child Support -Simplified Process.*” Items in **bold** are forms that you will need to file with the Court. Non-bold items are instructions or procedures. Do not copy or file those pages!

Order	File Number	Title	# Pages
1	DRMSS1k	Checklist: <i>You may use these forms if . . .</i>	1
2	DRMSS1t	Table of Contents (this page)	1
3	DRMSS10i	Notice to Person Filing	1
4	DRMSS11i	Instructions: How to Complete the “ <i>Petition to Modify Child Support – Simplified Process</i> ”	3
Use the FREE Online Child Support Calculator to produce the <i>Child Support Worksheet</i> that <u>must</u> accompany this <i>Petition</i> . For more information, see DRS12h			
5	DRS12h	How to complete a “ <i>Child Support Worksheet</i> “	1
6	DRMSS11p	Procedures: What to do After You Have completed the “ <i>Petition to Modify Child Support</i> ”	3
7	DRS81i	Instructions to Complete “ <i>Child Support Order</i> ”	1
8	DRMSS11f	<i>Petition to Modify Child Support - Simplified Process</i>	4
9	DRS81f	<i>Child Support Order</i>	8
10	DRS88f	<i>Current Employer Information Sheet</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.

Simplified Modification Notice to the Person Filing

Before your Petition can be processed, it is your responsibility to provide proof of service to the Family Department, that the other party received a copy of your petition and papers.

If you use a process server or the Sheriff's Office they will file the AFFIDAVIT OF SERVICE at the Clerk of Superior Court Filing Counter and provide you with a date-stamped copy.

If the other party signs the ACCEPTANCE of SERVICE or if you serve the other party by U.S. Mail or commercial delivery service (such as FedEx, DHL, etc), you must file at the Clerk of Superior Court Filing Counter the:

- "Acceptance of Service," or
 - "Affidavit of Service with Signature Confirmation" *along with* a copy or printout of the other party's signature acknowledging receipt of delivery, or if by Certified Mail, the green return-receipt card.
- If the other party is NOT served with a copy of the Petition to Modify Child Support within 120 days, the Court will send a *Notice of Dismissal*.
- If no proof of service is received by the Court, the request will be dismissed without further notice 180 days after filing.
- If a hearing is requested, you will be notified by mail.

Instructions to complete a Petition to Modify Child Support – Simplified Process

You will need:

- A copy of your current Child Support Order.
- A copy of the current Income Withholding Order for this case, if there is one.
- A completed Child Support Worksheet (See separate instructions for the Worksheet)

Match each numbered item in the instructions with the same numbered item (in parentheses) on the form. Type or print neatly using black ink only.

- A. Fill in the information requested at top left for the person who is filing this form. Write the ATLAS number if one has been assigned to your case. (The spaces marked “representing” and “state bar number” are used only if an attorney is preparing this form.)
 - B. Fill in the names of the persons shown as the “Petitioner/Party A” and the “Respondent/Party B” on the child support order.
 - C. Fill in the case number that appears on your Maricopa County order for child support.
1. Check the box to indicate whether you are Party A or Party B, and
Fill in the date on which the Judge signed your current child support order.
 - Fill in the name of the Judge who signed your current child support order.
 - Fill in name of the court (example: “Superior Court”)
 - Fill in name of the county where the order was issued.
 2. Check the boxes to indicate who, under the current child support order, is responsible for insurance.
 3. (a) Fill in the name of the person ordered to make child support payments.

(b) Fill in the amount, schedule (monthly, weekly, bi-weekly), and payment due date listed on the current child support order. (Example: \$150 per month payable on the 1st day of the month or \$150 per month payable one-half on the first and one-half on the 15th of the month).
 4. Fill in the amount from of your completed Child Support Worksheet.
 5. To use the “simplified” process, the calculations must show you are entitled to a change of at least 15%. To calculate the percentage of change between your current support amount and

the amount calculated on your new Child Support Worksheet, you will need to:

- Calculate the amount for (a) (See next page for assistance.)
- Enter the amount of child support currently ordered for (b)
- Divide the amount listed in (a) by the amount listed in (b) and enter the resulting number in (c).

See the information and step-by-step procedures on next page for assistance with 5(a)(b)(c).

5(a) is the difference between the amount of child support ordered and the amount you are requesting.

Enter the amount of child support on the current order (same as 3(a) on the Petition) \$ _____

Enter amount from line 35 of the new Parents Worksheet (same as (4) on the Petition) \$ _____

Which is larger? Write the larger amount here: _____

Write the smaller amount here: - _____

and subtract the smaller from the larger
Write the result in the box here and on line 5(a):

5(b) is the amount of child support in the current order (the same as 3(b) on the Petition). Write that amount on the line for 5(b).

5(c) is the difference between the amount currently ordered and the new amount requested (the amount you just calculated for 5(a)), divided by the amount currently ordered, written as a percentage.

Divided 5(a) by 5(b). Write the resulting percentage on the line for 5(c).

For example, *if* 5(a) is \$45 and 5(b) is \$225.

To get (c), you would divide 45 by 225, which would equal .2 or 20%

Shown another way, that's $45 / 225$ or $45 \div 225$, which equals .2 or 20%

6. If the State of Arizona is involved in your case because you or the other party received services from the State (DES or DCSE), mark the box for "Yes." Otherwise, mark the box for "No."

If the answer is "Yes," you will need to provide notice of this request to change the amount of child support to the Office of the Attorney General. Refer to page 2 of the "Procedures" document in the instruction packet for information on providing notice to the State.

7. If there is a current Income Withholding Order for child support, fill in the date of that order. If the amount withheld includes Court ordered payments in addition to current child support, list those other amounts included on the Income Withholding Order.

Relief Requested

- A. Write in the same amount as you previously entered on line 4.
- B. Check the boxes to indicate any requested changes in which parent is responsible for insurance, and then write in the percentages to indicate how any uninsured medical expenses should be shared.
- C. Requires no action on your part though you may strike it if you disagree.

Oath or Affirmation

Date and sign the Petition in the presence of a Clerk of Superior Court or a Notary Public. By signing, you are stating to the Court that the information you have provided is true and correct, under penalty of perjury.

How to complete a Child Support Worksheet

Use the **free** online child support calculator to produce the Child Support Worksheet 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 any Law Library Resource Center location. There is a small, per-page charge for printing. The online calculator is available at:

ezCourtForms <https://www.superiorcourt.maricopa.gov/ezcourtforms2/>

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 35 pages of Guidelines and Instructions.**

If you want to perform the calculations yourself, you will need an additional 60 or more pages of guidelines, instructions, and the Child Support Worksheet form. These are available for separate purchase from the Law Library Resource Center as part of the "How to Calculate Child Support" packet, or may be downloaded for free from the Law Library Resource Center's web page (<https://superiorcourt.maricopa.gov/llrc/family-court-forms/>).

When you have completed all needed forms, go to the "Procedures" page and follow the steps.

Law Library Resource Center

Procedures: What to do after you have completed the "*Petition to modify child support*" (simplified process)

STEP 1 Make three (3) copies* (4, if DES or DCSE is involved) of the:

- *Petition to Modify Child Support - Simplified Process*
- *Child Support Worksheet*
- *Child Support Order*
- *Current Employer Information Sheet*

* If DES or DCSS is involved, you will also need an extra copy of the *Petition* and the *Worksheet* to serve on the State, as described in STEP 5 on next page.

STEP 2 Separate your papers into 3 sets* (4, if DES or DCSE is involved).

<u>Set 1 for the Clerk of Superior Court:</u> " <i>Petition to Modify</i> " (original + 1 copy) " <i>Child Support Worksheet</i> " (original) " <i>Child Support Order</i> " (original + 2 copies) " <i>Current Employer Information Sheet</i> " (original)	<u>Set 2: Your Copy:</u> " <i>Petition to Modify</i> " (copy) " <i>Child Support Worksheet</i> " (copy)
Two Self-Addressed Stamped Envelopes: <ul style="list-style-type: none">• 1 addressed to <i>YOU</i>, and• 1 addressed to <i>the other party</i> so the Court can mail the decision	<u>Set 3: Other Party's Copy:</u> " <i>Petition to Modify</i> " (copy for process server) " <i>Child Support Worksheet</i> " (copy for process server)
* <u>Set 4 – to Serve on the State</u> if DES or DCSS is involved. " <i>Petition to Modify</i> " (copy) " <i>Child Support Worksheet</i> " (copy) " <i>Acceptance of Service</i> " (original) (See Step 5 on next page for more information on serving the State)	

STEP 3. Go to the Clerk of Superior Court filing counter to file your papers. You may file your papers from 8am to 5pm, Monday through Friday, at the following Superior Court locations:

Central Court Building
201 West Jefferson, 1st floor
Phoenix, Arizona 85003

Northwest Court Complex
14264 West Tierra Buena Lane
Surprise, Arizona 85374

Southeast Court Complex
222 East Javelina Avenue, 1st floor
Mesa, Arizona 85210

Northeast Court Complex
18380 North 40th Street
Phoenix, Arizona 85032

Hand the originals and all sets of copies 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: There are fees for filing petitions, responses, requests, motions, objections, and various forms with the Court. Cash, AMEX/VISA/MasterCard debit or credit cards, or money order made payable to the "Clerk of Superior Court" are acceptable forms of payment.

A list of current fees is available from the Law Library Resource Center website or 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 Law Library Resource Center.

STEP 4: Make sure you get back the following from the Clerk:

- Your copy.
- The other Party's copy
- The copy for DES/DCSS, *if required*

STEP 5: 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 Law Library Resource Center or the Superior Courts webpage.

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 (DCSS 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 Child Support*",
- a copy of the "*Child Support Worksheet*",
- "*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 Law Library Resource Center or from the Internet.

(b) There may also be a "drop-box" in the Clerk of Superior 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 Services Section
2005 N. Central Avenue – Mail Drop 7611
Phoenix, AZ 85004

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

Note: A party who is served with the papers *in Arizona*, whether a person or the State of Arizona (the AG / DCSE), has 20 days from the date of service to file a request for a hearing. A party who is served with the papers outside Arizona has 30 days from the date of service to file a request for hearing.

STEP 6: WAIT for the Court to let you know whether the Order was signed or the matter was set for a hearing. If a hearing is requested, a hearing or a conference will be scheduled. If no party requests a hearing, the Judge may grant or deny your request or may still schedule a hearing to obtain further information. If a hearing is scheduled, you will receive written notice of the date, time, and location.

If a conference and hearing have been scheduled, be sure to write down the date, time and place of the court hearing, and attend the hearing..

- Be on time
- Dress neatly
- Do NOT bring children to Court

Instructions: How to Complete the Child Support Order

Type or print neatly using black ink only.

Case Caption

- If you are providing this information to establish a child support order, fill in the names and the dates of birth (DOB) of the persons shown as Petitioner/Party A and Respondent/Party B on the petition to establish child support. Or to get other relief (divorce, paternity, etc.)
- If you are providing this information to modify your current support order, fill in the names and dates of birth (DOB) of the persons shown as Petitioner/Party A and Respondent/Party B on the Order that established the child support.
- Fill in your case number.
- Fill in your ATLAS number. If you do not have an ATLAS number, leave this item blank.

Numbered Instruction

Match the number of the instruction below to the matching number on the first page of the Child Support Order.

- (1) Fill in the full name of the legal parents (Party A and Party B) of the minor children who are the subject of this Child Support Order.

Fill in the full name and birth date of all minor children who are the subject of this Child Support Order. (Use extra pages if necessary).

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

(A) _____
Name of Petitioner/Party A (in original case)

Case Number: (C) _____

PETITION TO MODIFY (change)
CHILD SUPPORT
SIMPLIFIED PROCESS

(B) _____
Name of Respondent/Party B, (in original case)

IMPORTANT NOTICE TO PARTY NOT REQUESTING THE MODIFICATION (CHANGE). Your support order may be modified (changed) if you do not request a hearing.

1. ☐ Party A or ☐ Party B asks this court to modify the Arizona child support order:

The Order was issued on: _____ (Month/Day/Year)

The Order was issued by: _____ (Name of Court)

Located in this County: _____

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.

2. Under the current child support order:

☐ Party A is responsible for providing:

☐ medical insurance

☐ dental insurance

☐ vision care insurance

☐ Party B is responsible for providing:

☐ medical insurance ☐ dental insurance ☐ vision care insurance

☐ Neither party was ordered to provide:

☐ medical insurance ☐ dental insurance ☐ vision care insurance

3. The child support order currently in effect requires ☐ Party A or ☐ Party B to make payments of (b) \$ _____ per _____, payable on the _____ day of the month.

4. Attached is a Child Support Worksheet. According to the worksheet calculations, the child support amount should be \$ _____ per month.

5. The following calculations show that the new amount varies from the current amount of court-ordered child support by 15% or more.

(a) _____ divided by (b) _____ and then multiplied by 100 = (c) _____%

a = the difference between the amount currently ordered and the amount requested;

b = the amount currently ordered; and,

c = the percentage change

6. Is the Department of Economic Security or the Division of Child Support Enforcement (DES or DCSE) providing services to at least one of the parties? ☐ Yes ☐ No ☐ Unknown

(If YES, see instructions regarding notice to the State in the packet.)

7. Other court-ordered payments included in the current Order of Assignment dated

_____/_____/_____

Spousal Maintenance: \$ _____ per _____

Payments on Arrears: \$ _____ per _____

Other: \$ _____ per _____

RELIEF REQUESTED (WHAT I WANT THIS COURT TO DO):

A. I request that child support be ordered in the amount of \$ _____ per month to be paid by ☐ Party A or ☐ Party B, and that relief requested in the Child Support Worksheet be ordered.

B. Regarding insurance for minor children, order that:

☐ Party A is responsible for providing:

☐ medical insurance

☐ dental insurance

☐ vision care insurance

☐ Party B is responsible for providing:

☐ medical insurance

☐ dental insurance

☐ vision care insurance

The costs of medical/dental/vision care expenses not paid by insurance shall be shared as follows: Party A _____ % Party B _____. Request for payment or reimbursement must be provided to the obligated parent(s) within 180 days after the services occurred. The obligated parent must pay or make payment arrangements within 45 days after receipt of the request.

A. C. If this matter goes to hearing, I further request that costs and fees incurred in bringing this action be ordered to be paid by the opposing party.

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: _____

(date)

by _____.

(Notarial Officer's Stamp or Seal)

Notarial Officer

NOTICE TO PARTIES

If you do not agree with the modification/change in child support, you have twenty (20) days to ask for a hearing. If service of process is made outside the State of Arizona, the parent receiving service has 30 days in which to ask for a hearing.

Upon proof of service and if no hearing is requested within the time allowed, the court will review the request and enter an appropriate order modifying the support award. If an error is noted, the amount awarded may be different from the amount requested, but the modification will not be greater than the amount requested.

In the event the court has serious concerns regarding the accuracy of the information, or if a substantial mathematical error is found, the court may set the matter for hearing. The court will set a hearing if requested by either party within the time allowed. No order will be modified without a hearing if a hearing is requested. The forms necessary to request a hearing (below) may be downloaded for free from the Law Library Resource Center ("LLRC") webpage or purchased at any LLRC location.

- Request for Hearing
- Child Support Worksheet

Person Filing:_____

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

For Clerk's Use Only

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

Petitioner / Party A

Case No._____

ATLAS No._____

Date of Birth (Month, Date, Year)

**CHILD SUPPORT ORDER
A.R.S. § 25-503**

Respondent / Party B

Date of Birth (Month, Date, Year)

THE COURT FINDS:

1. Party A: _____ and

Party B: _____

Have a duty to support the following children:

Child(ren)'s Name(s)

Date of Birth

2. Child Support Guidelines: The required financial factors and any discretionary adjustments pursuant to the Arizona Child Support Guidelines are as set forth in the Child Support Worksheet, attached and incorporated by reference.

3. Child Support:

☐ ☐ Party A ☐ Party B is ordered to pay child support in the amount of \$_____ per month to _____ pursuant to the Arizona Child Support Guidelines without deviation.

☐ ☐ Party A ☐ Party B is obligated to pay child support to ☐ Party A ☐ Party B in the amount of \$_____ per month pursuant to the Arizona Child Support Guidelines without deviation. This amount is an appropriate amount to award for child support in this case except that the Court finds it more appropriate and just to make a rounding adjustment to the exact guideline amount for ease of calculation to \$_____ per month.

☐ ☐ Party A ☐ Party B is obligated to pay child support to ☐ Party A ☐ Party B in the amount of \$_____ per month pursuant to the Arizona Child Support Guidelines. Application of the child support guidelines in this case is inappropriate or unjust. The Court has considered the best interests of the child in determining that a deviation is appropriate.

After deviation the child support order is \$_____ per month.

☐ ☐ Party A ☐ Party B is obligated to pay child support to ☐ Party A ☐ Party B in the amount of \$_____ per month pursuant to the Arizona Child Support Guidelines. Application of the child support guidelines in this case is inappropriate or unjust. The Court has considered the best interests of the child in determining that a deviation is appropriate.

After deviation the child support order is \$_____ per month. Further, the parties have entered into a written agreement or their agreement is on the record and is free of duress and coercion with knowledge of the amount of child support that would have been ordered under the guidelines but for the agreement.

Reason(s) for deviation:

4. Support Arrears:

☐ ☐ Party A ☐ Party B owes child support arrearages to ☐ Party A ☐ Party B in the total amount of \$_____ for the time period of _____ through _____ plus accrued interest on prior child support arrearages due of \$_____ calculated through the date of _____.

- ☐ The Court finds no child support arrearages due and owing.
- ☐ No evidence was presented in support of child support arrearages.

5. Past Support:

☐ It is appropriate to award ☐ Party A ☐ Party B an additional judgment for past support in the amount of \$_____ for the period between the filing of this current petition and the date current child support is ordered to begin.

☐ Temporary support or voluntary/direct support payments in the amount of \$_____ were paid during the period above; therefore, the past support is adjusted to \$_____.

☐ It is appropriate to award ☐ Party A ☐ Party B an additional judgment in the amount of \$_____ for past support owed from the date of separation, but not more than three years before the date of filing the current petition.

☐ Temporary support or voluntary/direct support payments in the amount of \$_____ were paid during the period above; therefore, the past support is adjusted to \$_____.

- ☐ The Court finds no past support amount due and owing.
- ☐ No evidence was presented in support of past child support.
- ☐ The Court finds no temporary support or voluntary/direct support payments were paid.
- ☐ No evidence was presented in support temporary support or voluntary/direct support payments.

6. Interest:

☐ The Court finds interest in the amount of \$_____ due to ☐ Party A
☐ Party B

For the period of: _____ to _____.

It is ordered that:

1. Child Support Judgment:

☐ Party A ☐ Party B shall pay child support to _____ in the amount of \$_____ per month. This monthly amount, payable by income withholding order, shall be paid on the 1st day of each month beginning _____.

2. Support Arrearages Judgment:

☐ Party A ☐ Party B is granted judgment against _____ in the amount of \$_____ as and for child support arrearages for the period of _____ through the date of _____ together with interest on said amount at the legal rate of 10% per annum until paid in full, plus additional accrued interest on prior child support judgments of \$_____ calculated through the date of _____.

☐ Party A ☐ Party B shall pay, in addition to ☐ his OR ☐ her current support payment, the amount of \$_____ per month toward this judgment, payable on the first day of each month, beginning _____ until paid in full.

☐ NO Judgment for child support arrearages is entered.

3. Past Support Judgment:

☐ Party A ☐ Party B is granted a past support judgment against ☐ Party A ☐ Party B in the additional amount of \$_____. ☐ Party A ☐ Party B shall pay the additional amount of \$_____ per month toward this judgment, payable on the first day of each month commencing _____ until paid in full.

OR

☐ NO Judgment for past support is entered.

4. Payments and Clearinghouse: All payments, plus the statutory handling fee, shall be made through the Support Payment Clearinghouse pursuant to an Order of Assignment, or "Income Withholding Order" signed this date. Any time the full amount of support ordered is not withheld, the person obligated to pay (the obligor) remains responsible for the full monthly amount ordered. Payments not made directly through the Support Payment Clearinghouse shall be considered *gifts* unless otherwise ordered. All payments shall be made payable to and mailed directly to:

Support Payment Clearinghouse
P.O. Box 52107
Phoenix, AZ 85072-2107

Payments must include ☐ Party A's or ☐ Party B's name, and Atlas number. Pursuant to A.R.S. § 25-322, the parties shall submit current address information in writing to the Clerk of Superior Court and the Support Payment Clearinghouse immediately. The obligor (party being ordered to pay) shall submit the names and addresses of his or her employers or other payors within 10 days. Both parties shall submit address changes within 10 days of the change.

5. Total Monthly Payments:

☐ Party A ☐ Party B shall make total monthly payments to ☐ Party A ☐ Party B in the amount of \$ _____ per month, payable on the first day of each month, beginning _____ as follows:

Monthly Payments:

Current child support payment as ordered above:	\$ _____
Current spousal maintenance payment:	\$ _____
Support arrearage payment:	\$ _____
Clearinghouse handling fee:	\$ _____ 8.00
Total monthly payment:	\$ _____

6. Medical, Dental, Vision Care Insurance for Minor Children:

☐ ☐ Party A OR ☐ Party B is responsible for providing ☐ medical ☐ dental ☐ vision care insurance for the minor child(ren) and shall continue to pay premiums for any medical, dental and vision policies covering the child(ren) that are currently included in the incorporated Parent's Worksheet for Child Support.

OR

- ☐ ☐ Party A OR ☐ Party B shall be individually responsible for providing medical insurance for the minor child(ren) of the parties as soon as it becomes accessible and available at a reasonable cost, as neither party currently has the ability to obtain such medical insurance.

Medical, dental, and vision insurance, payments and expenses are based on the information in the Parent's Worksheet for Child Support attached hereto 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. An insurance card must be provided to the other party. Notification must also be provided to the other party if coverage is no longer being provided for the child(ren).

7. Non-Covered Medical Expenses:

☐ Party A is ordered to pay _____ % and ☐ Party B is ordered to pay _____ % of all reasonable uncovered and/or uninsured medical, dental, vision, prescription and other health care charges for the minor child(ren).

- A request for payment or reimbursement of uninsured medical, dental and/or vision costs must be provided to the other party within 180 days after the date the services occur.
- The party responsible for payment or reimbursement must pay their share, as ordered by the Court, or make acceptable payment arrangements with the provider or person entitled to reimbursement within 45 days after receipt of the request.

8. Travel expenses: The costs of travel related to parenting time over 100 miles one way shall be shared as follows: Party A _____ % Party B _____ %

9. Information exchange: The parties shall exchange financial information such as copies of tax returns, financial affidavits, and earnings statements every twenty-four months. At the time the parties exchange financial information, they shall also exchange residential addresses and the names and addresses of their employers unless the Court has ordered otherwise.

10. Tax exemptions: The Court allocates the following federal tax exemption(s) for the dependent child(ren):

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

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.

☐ Party A or ☐ Party B may claim the allocated tax exemptions only if all support and arrears ordered for the year have been paid by January 15 of the following year. An Internal Revenue Service form 8332 may need to be signed and filed with a party's income tax return. *See IRS Form 8332 for more detailed information.*

☐ Party A or ☐ Party B may unconditionally claim the tax exemption allocated to ☐ Party A or ☐ Party B for income tax purposes. An Internal Revenue Service Form 8332 may need to be signed and filed with a party's income tax return. *See IRS Form 8332 for more detailed information.*

Even though the court's judgment contains orders regarding medical insurance and the allocation of the right to claim the child as a dependent for the purposes of federal taxes, these orders are not binding on the IRS. Under the Affordable Care Act, the party who claims a child as a dependent on a federal tax return has the obligation to ensure that the child is covered by medical insurance and may be penalized by the IRS for failing to do so. This penalty may be imposed even if it is the other party's responsibility to carry medical insurance on the child under the Decree of Dissolution of Marriage.

11. Modification: If this is a modification of child support, all other prior orders of this Court not modified remain in full force and effect.

12. Emancipation: A child is emancipated:

- On the child's 18th birthday, however if a child is still attending high school or a certified high school equivalency program, support will continue until graduation or the child reaches 19 years of age.
- On the date of the child's marriage.
- When the child is adopted.
- When the child dies.

13. Other findings and orders:

14. Final Appealable Order. No further claims or issues remain for the Court to decide. Therefore, IT IS FURTHER ORDERED pursuant to Rule 78(c), Arizona Rules of Family Law Procedure, this final judgment/decreed is signed by the Court and it shall be entered by the Clerk of Superior Court. The time for appeal begins upon entry of this judgment by the Clerk of Superior Court. For more information on appeals, see Rule 8 and other Arizona Rules of Civil Appellate Procedure. IT IS FURTHER ORDERED denying any affirmative relief sought before the date of this Order that is not expressly granted above.

Date

Judicial Officer

15. Stipulation. Signature by both Parties (if applicable):

☐ Party A ☐ Party B, by signing this document, we state to the Court under penalty of perjury that we read and agree to this Court Order, and that all the information contained in it is true, correct, and complete to the best of our knowledge and belief.

Party A's Signature

Date

Party B's Signature

Date

If either party is represented by a lawyer, the lawyer must sign below:

Party A's Lawyer Signature

Date

Party B's Lawyer Signature

Date

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	_____
AG	_____
SUB	_____
DCSE	_____