DIVORCE
WITHOUT MINOR CHILDREN
For Petitioner Only

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1

To File for Divorce in a Non-Covenant Marriage Without Minor Children
Part 1: FORMS

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DRDA1f – **5012** - 112116

SELF-SERVICE CENTER

PETITION AND PAPERS *FOR "DISSOLUTION OF MARRIAGE - (DIVORCE) WITHOUT MINOR CHILDREN"*
CHECKLIST

Use the forms and instructions in this packet ONLY if the following factors apply to your situation:

- ✓ You want to file a petition for divorce **AND**,
- ✓ You do **not** have a "covenant" marriage, or since you were married you have **not** agreed to change your marriage to a "covenant" marriage (These papers will ***not*** work for a covenant marriage).*

***What is a "Covenant Marriage"? As of August 21, 1998, the Arizona Legislature created a new type of marriage called "covenant" marriage. To have a covenant marriage, both husband and wife would have had to:**

1. **sign papers *requesting* to have a covenant marriage;**
2. **attend pre-marital counseling; *AND***
3. **your marriage license would say "Covenant Marriage."**

If you were married *before* August 21, 1998 and have not signed papers to *convert* your marriage to a covenant marriage, you do *not* have a covenant marriage.

If you still have questions about whether you have a covenant marriage, see a lawyer for help.

- ✓ You and your spouse have **no minor children** with each other AND the wife is **not** pregnant by the husband, **AND**
- ✓ You or your spouse have lived in Arizona at least 90 days before you file the Petition, or one of you is a member of the armed forces and has been stationed in Arizona at least 90 days before you file, **AND**
- ✓ You believe that the marriage is irretrievably broken (you and your spouse cannot make the marriage work) **AND**
- ✓ You or your spouse have either tried to resolve your problems through Conciliation Court, or there is no point in trying to resolve your problems because the marriage is irretrievably broken.

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.

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DIVORCE WITHOUT MINOR CHILDREN

FOR PETITIONER ONLY

PART 1 - FORMS: PETITION AND FIRST COURT PAPERS

This packet contains court forms and instructions to file (fill in reason for forms and instructions). 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	DRDA1k	Checklist: You may use these forms if . . .	1
2	DRDA1ft	Table of Contents (this page)	1
3	DRSDS10f-A	***"Family Court / Sensitive Data Coversheet Without Children" (*no copies necessary)***	1
4	DR11f	***"Summons"***	2
5	DR14f	***"Preliminary Injunction"***	2
6	DRDA10f	***"Petition for Dissolution of a Non-Covenant Marriage (Divorce) -- Without Minor Children"***	6
7	DRD16f	***"Notice of Right to Convert Health Insurance"***	1
8	DR16f	***"Notice Regarding Creditors"***	2

***No copies required.** **File original only. Do not serve on other party.**

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Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
ATLAS Number: _____
Lawyer's Bar Number: _____

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

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

_____
Petitioner

_____
Respondent

Case No. _____

ATLAS No. _____

FAMILY COURT /SENSITIVE DATA COVERSHEET WITHOUT CHILDREN
(CONFIDENTIAL RECORD)

Fill out. File with Clerk of Court. Social Security Numbers should appear on this form only and should be omitted from other court forms. Access Confidential pursuant to ARFLAP 43(G)(1).

A. Personal Information:	**Petitioner**	**Respondent**
Name		
Gender	☐ Male or ☐ Female	☐ Male or ☐ Female
Date of Birth (Month/Day/Year)		
Social Security Number		

WARNING: DO NOT INCLUDE MAILING ADDRESS ON THIS FORM IF REQUESTING ADDRESS PROTECTION

Mailing Address		
City, State, Zip Code		
Contact Phone		
Email Address		
Current Employer Name		
Employer Address		
Employer City, State, Zip Code		
Employer Telephone Number		
Employer Fax Number		

B. Type of Case being filed - Check only one category.
Check only if no other category applies

☐ **Dissolution (Divorce)**
☐ **Legal Separation**
☐ **Annulment**
☐ **Order of Protection**
☐ **Other***

Interpreter Needed:
☐ **Yes** ☐ **No**

If yes, what language(s)?
_____
_____

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SDS

Person Filing: _____
Address (if not protected):_____
City, State, Zip Code:_____
Telephone:_____
Email Address:_____
ATLAS Number: _____
Lawyer's Bar Number:_____

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

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

_____ **Case No.:** _____

Name of Petitioner

SUMMONS

And

_____
Name of Respondent

WARNING: This is an official document from the court that affects your rights. Read this carefully. If you do not understand it, contact a lawyer for help.

FROM THE STATE OF ARIZONA TO: _____
Name of Respondent

1. **A lawsuit has been filed against you. A copy of the lawsuit and other court papers are served on you with this *"Summons".***

2. **If you do not want a judgment or order taken against you without your input, you must file an *"Answer"* or a *"Response"* in writing with the court, and pay the filing fee. If you do not file an *"Answer"* or *"Response"* the other party may be given the relief requested in his/her Petition or Complaint. To file your *"Answer"* or *"Response"* take, or send, the *"Answer"* or *"Response"* to the:**

   - **Office of the Clerk of the Superior Court, 201 West Jefferson Street, Phoenix, Arizona 85003-2205 *OR***
   - **Office of the Clerk of the Superior Court, 18380 North 40th Street, Phoenix, Arizona 85032 *OR***
   - **Office of the Clerk of Superior Court, 222 East Javelina Avenue, Mesa, Arizona 85210-6201 *OR***
   - **Office of the Clerk of Superior Court, 14264 West Tierra Buena Lane, Surprise, Arizona, 85374.**

   Mail a copy of your *"Response"* or *"Answer"* to the other party at the address listed on the top of this Summons.

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3. **If this *"Summons"* and the other court papers were served on you by a registered process server or the Sheriff, within the State of Arizona, your *"Response"* or *"Answer"* must be filed within TWENTY (20) CALENDAR DAYS from the date you were served, not counting the day you were served. If this *"Summons"* and the other papers were served on you by a registered process server or the Sheriff outside the State of Arizona, your Response must be filed within THIRTY (30) CALENDAR DAYS from the date you were served, not counting the day you were served. Service by a registered process server or the Sheriff is complete when made. Service by Publication is complete thirty (30) days after the date of the first publication.**

4. **You can get a copy of the court papers filed in this case from the Petitioner at the address listed at the top of the preceding page, from the Clerk of the Superior Court's Customer Service Center at:**

   - **601 West Jackson, Phoenix, Arizona 85003**
   - **18380 North 40th Street, Phoenix, Arizona 85032**
   - **222 East Javelina Avenue, Mesa, Arizona 85210**
   - **14264 West Tierra Buena Lane, Surprise, Arizona, 85374.**

5 **If this is an action for dissolution (divorce), legal separation or annulment, either or both spouses may file a *Petition for Conciliation* for the purpose of determining whether there is any mutual interest in preserving the marriage or for Mediation to attempt to settle disputes concerning legal decision-making (custody) and parenting time issues regarding minor children.**

6. **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.**

7. **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.**

SIGNED AND SEALED this date _____

MICHAEL JEANES, CLERK OF COURT

By_____

Deputy Clerk

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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

_____
Name of Petitioner

Case Number:_____

PRELIMINARY INJUNCTION

AND

_____
Name of Respondent

WARNING: This is an official Order from the court. It affects your rights. Read this Order immediately and carefully. If you do not understand it, contact a lawyer for help.

Your spouse has filed a ***"Petition for Dissolution"*** (Divorce) or ***"Petition for Annulment"*** or ***"Petition for Legal Separation"*** with the court. This Order is made at the direction of the Presiding Judge of the Superior Court of Arizona in Maricopa County. This Order has the same force and effect as any order signed by the judge. You and your spouse **must** obey this Order. This Order may be enforced by any remedy available under the law, including an ***"Order of Contempt of Court."*** To help you understand this Order, we have provided this explanation. Read the explanation and then read the statute itself. **If you have any questions, you should contact a lawyer for help.**

EXPLANATION: (What does this Order mean to you?)

1. **ACTIONS FORBIDDEN BY THIS ORDER:** From the time the ***"Petition for Dissolution"*** (Divorce) or ***"Petition for Annulment"*** or ***"Petition for Legal Separation"*** is filed with the court, until the judge signs the Decree, or until further order of the court, both the Petitioner and the Respondent **shall not** do any of the following things:

- ✓ You may **not** hide earnings or community property from your spouse, **AND**
- ✓ You may **not** take out a loan on the community property, **AND**
- ✓ You may **not** sell the community property or give it away to someone, **UNLESS** you have the written permission of your spouse or written permission from the court. The law allows for situations in which you may need to transfer joint or community property as part of the everyday running of a business, or if the sale of community property is necessary to meet necessities of life, such as food, shelter, or clothing, or court fees and attorney fees associated with this action. If this applies to you, you should see a lawyer for help, **AND**
- ✓ Do **not** harass or bother your spouse or the children, **AND**
- ✓ Do **not** physically abuse or threaten your spouse or the children, **AND**
- ✓ Do **not** take the minor children, common to your marriage, out of the State of Arizona for any reasons, without a written agreement between you and your spouse or a Court Order, **before** you take the minor children out of the State.
- ✓ Do **not** remove, or cause to be removed, the other party or the minor children of the parties from any existing insurance coverage, including medical, hospital, dental, automobile and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.

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Case No. _____

STATUTORY REQUIREMENTS: Arizona Law, A.R.S. §25-315(A) provides:

1(a). **RESTRICTIONS ON PROPERTY OF THE MARRIAGE:** That both parties are enjoined from transferring, encumbering, concealing, selling, or otherwise disposing of any of the joint, common or community property of the parties, **except** if related to the usual course of business, the necessities of life, or court fees and reasonable attorney fees associated with an action filed under this article, without the written consent of the parties or the permission of the court.

1(b). **REQUIREMENTS OF BEHAVIOR:** That both parties are enjoined from molesting, harassing, disturbing the peace, or committing an assault or battery on, the person of the other party or any natural or adopted child of the parties.

1(c). **RESTRICTIONS ABOUT YOUR MINOR CHILDREN:** That both parties are enjoined from removing any natural or adopted minor child(ren) of the parties, then residing in Arizona, from the jurisdiction of the court without the prior written consent of the parties or the permission of the court.

1(d). **RESTRICTIONS ABOUT INSURANCE:** That both parties are enjoined from removing, or causing to be removed, the other party or the minor children of the parties from any existing insurance coverage, including medical, hospital, dental, automobile and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.

2. **EFFECTIVE DATE OF THIS ORDER:** This Order is effective against the person who filed for divorce, annulment, or legal separation (the Petitioner) when the Petition was filed with the court. It is effective against the other party (the Respondent) when it is served on the other party, or on actual notice of the Order, whichever is sooner. This Order shall remain in effect until further order of the court, or the entry of a Decree of Dissolution, Annulment, or Legal Separation.

3. **ORDER TO PETITIONER:** You **must** serve a copy of this Order upon the Respondent, along with a copy of the Petition for Dissolution, Annulment or Legal Separation, the Summons, and other required court papers.

4. **WARNING:** This is an official Court Order. If you disobey this Order, the court may find you in contempt of court. You may also be arrested and prosecuted for the crime of interfering with judicial proceedings and any other crime you may have committed by disobeying this Order.

5. **LAW ENFORCEMENT:** You or your spouse may file a certified copy of this Order with your local law enforcement agency. You may obtain a certified copy from the Clerk of the Court that issues this Order. If any changes are made to this Order and you have filed a certified copy of this Order with your local law enforcement agency, you **must** notify them of the changes.

6. **DESCRIPTION OF THE PARTIES:**

Petitioner:

Name:_____ Gender: ☐ Male ☐ Female

Height:_____ Weight:_____

Driver's License (**last 4 nos**.)_____

Date of Birth:_____

Respondent:

Name:_____ Gender: ☐ Male ☐Female

Height:_____ Weight:_____

Driver's License (**last 4 nos**.)_____

Date of Birth:_____

GIVEN UNDER MY HAND AND THE SEAL OF THE COURT this _____ day of _____,_____.

Clerk of the Superior Court

By:_____, Deputy Clerk

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Person Filing: _____
Address (if not protected):_____
City, State, Zip Code:_____
Telephone:_____
Email Address:_____
ATLAS Number: _____
Lawyer's Bar Number:_____

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

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

Case Number: _____

_____
Name of Petitioner

AND

_____
Name of Respondent

PETITION FOR DISSOLUTION OF MARRIAGE (DIVORCE) WITHOUT MINOR CHILDREN

STATEMENTS TO THE COURT, UNDER OATH OR AFFIRMATION

1. INFORMATION ABOUT ME, THE PETITIONER

Name: _____
Address: _____
Date of Birth: _____
Job Title: _____
Starting with today, number of months/years in a row you, the Petitioner, have lived in Arizona.____

2. INFORMATION ABOUT MY SPOUSE, THE RESPONDENT

Name: _____
Address:_____
Date of Birth: _____
Job Title: _____
Starting with today, number of months/years in a row the Respondent has lived in Arizona._____

3. INFORMATION ABOUT MY MARRIAGE

Date of Marriage: _____
City and state or country where we were married: _____

The following statements MUST BE TRUE for you to use this document and to qualify for divorce in Arizona **AND** ***you must check the boxes*** to indicate that the statements are true *or your case may not proceed*.

☐ **We do not have a covenant marriage** (If not sure, refer to the INSTRUCTIONS for information)**.**
☐ **Our marriage is broken beyond repair** ("irretrievably broken") **and there is no hope of reconciliation.**
☐ **We have tried to resolve our problems through Conciliation Services or going to Conciliation Services would not work.**

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4. 90 DAY REQUIREMENT

☐ I OR ☐ my spouse have lived, or have been stationed while a member of the Armed Forces, in Arizona for at least 90 days before I filed this action. **(WARNING: If this statement is not true, you cannot file for a divorce until it becomes true.)**

5.a. COMMUNITY PROPERTY: (Check one box)

☐ My spouse and I **did not** acquire any community property during the marriage, OR

☐ My spouse and I **did** acquire community property during our marriage, and we should divide it as follows:

☐ **Real estate located at:** **Petitioner** **Respondent** **Value**
☐ ☐ $_____

Legal Description: _____
_____
_____

☐ **Real estate located at:** **Petitioner** **Respondent** **Value**
_____ ☐ ☐ $_____

Legal Description:_____
_____

☐ **Household furniture and appliances:** **Petitioner** **Respondent** **Value**

_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Household furnishings:** **Petitioner** **Respondent** **Value**

_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Other items:** **Petitioner** **Respondent** **Value**

_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Pension/Retirement fund/profit sharing/stock plan/401K:**

	Petitioner	**Respondent**	**Value**
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

☐ **Motor vehicles:**
Make: _____**Year**:_____ ☐ ☐ $_____
Model:_____
VIN:_____
Lien Holder:_____

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	Petitioner	Respondent	Value
Make: _____**Year**:_____ **Model:** _____ **VIN:** _____ **Lien Holder:**_____	☐	☐	$_____

5.b. SEPARATE PROPERTY. (Check all boxes that apply.)

☐ I **do not** have any property, or separate property, that I brought into the marriage.
☐ My spouse, the Respondent, **does not** have any property, or separate property, that he/she brought into the marriage.
☐ I **do** have property, or separate property, that I brought into the marriage. I want this property awarded to me as described below.
☐ My spouse, the Respondent, **does have** property, or separate property, that he/she brought into the marriage. I want this property awarded to my spouse as described below.

Separate Property: (List the property and the value of the property, and check the box to tell the court who should get the property.)

Description of Separate Property	Petitioner	Respondent	Value
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

6.a. COMMUNITY DEBTS: (check one box)

☐ My spouse and I **did not** incur any community debts during the marriage, **OR**

☐ My spouse and I **did** incur community debts during the marriage and we should divide the responsibility for these debts as follows:

DESCRIPTION OF DEBT	Petitioner	Respondent	Amount Owed
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

6.b. SEPARATE DEBTS. (Check all boxes that apply.)

☐ My spouse and I **do not** have any debt, or separate debt, that were incurred prior to the marriage.
☐ I **do** have debt, or separate debt that I incurred prior to the marriage, that should be paid by me as described below.
☐ My spouse **does** have debt, or separate debt that he/she incurred prior to the marriage, that should be paid by my spouse as described below.

DESCRIPTION OF DEBT	Petitioner	Respondent	Amount Owed
_____	☐	☐	$_____
_____	☐	☐	$_____
_____	☐	☐	$_____

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7. TAX RETURNS: (Check this box if this is what you want.)

☐ After the judge or commissioner signs the Decree of Dissolution of Marriage (Divorce), the parties will pay federal and state taxes as follows, (subject to IRS Rules and Regulations): For previous years (the years the parties were married, not including the year the Decree was signed),the parties will file joint federal and state income tax returns. In addition, for previous calendar years, both parties will pay, and hold the other harmless from, half of all additional income taxes and other costs, if any, and each will share equally in any refunds. For the calendar year (the year that the Decree is signed) and all future calendar years, each party will file separate federal and state income tax returns. Each party will give the other party all necessary documentation to do so.

8. SPOUSAL MAINTENANCE/SUPPORT (ALIMONY) (Check the box that applies to you):

☐ Neither party is entitled to spousal maintenance/support (alimony), **OR**

☐ Petitioner **OR** ☐ Respondent is entitled to spousal maintenance/support because: (Check one or more of the box(es) below that apply. At least one reason must apply to get spousal maintenance/ support.)

☐ Person lacks sufficient property to provide for his/her reasonable needs;

- ☐ Person is unable to support himself/herself through appropriate employment;
- ☐ Person is the custodian of a child(ren) whose age or condition is such that the person should not be required to seek employment outside the home;
- ☐ Person lacks earning ability in the labor market adequate to support himself/herself; and,
- ☐ Person contributed to the educational opportunities of the other spouse or has a marriage of long duration and is now of an age that precludes the possibility of gaining employment adequate to support himself/herself.

9. PREGNANCY

☐ Wife is **not** pregnant, OR

☐ Wife is pregnant

The baby is due on _____(date), (and, check one box below):

- ☐ The Petitioner and Respondent **are** the parents of the child, OR
- ☐ Petitioner is **not** the parent of the child, OR
- ☐ Respondent is **not** the parent of the child.

WARNING.

If wife is pregnant and the Petitioner and the Respondent are the parents of the child, STOP!!!! YOU MUST FILE THE PAPERS FOR DIVORCE WITH CHILDREN.

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REQUESTS TO THE COURT:

A. DISSOLUTION (DIVORCE):

☐ Dissolve our marriage and return each party to the status of a single person.

B. NAMES: My complete married name is: (Optional. Complete ONLY if you want to change your name)

I want my legal name restored to: (List complete maiden name or legal name before this marriage)

WARNING: If you are **not** the person who is requesting to have your former name restored, the court must have a written request from the party who wants his/her name restored, to change the name.

C. SPOUSAL MAINTENANCE/SUPPORT (ALIMONY):

☐ Order spousal maintenance/support to be paid by ☐ Petitioner, or ☐Respondent through the Support Payment Clearinghouse in the amount of $_____ per month, plus the statutory fee, beginning with the first day of the month **after** the judge or commissioner signs the Decree of Dissolution and continuing until the person receiving spousal maintenance/support is remarried or deceased, or for a period of _____months.

D. COMMUNITY PROPERTY:

☐ Make a fair division of all community property as requested in this Petition.

E. COMMUNITY DEBTS:

☐ Order each party to pay community debts as requested in the Petition, and to personally pay any other community debts unknown to the other party. Order each party to pay, and hold the other party harmless from, debts incurred by him/her since the parties' separation on _____ (date) or from the date the Respondent was served with the Petition for Dissolution.

F. SEPARATE PROPERTY: ☐ Award each party his/her separate property.

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G. OTHER ORDERS I AM REQUESTING (Explain request here):

_____

_____

_____

_____

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

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NOTICE OF YOUR RIGHTS ABOUT HEALTH INSURANCE COVERAGE WHEN A PETITION FOR DISSOLUTION (DIVORCE) IS FILED (A.R.S. §20-1377 and §20-1408)

Petitioner/Parent A: _____ **Case #:** _____

Respondent/Parent B: _____

WARNING: THIS IS AN IMPORTANT LEGAL NOTICE. YOUR RIGHTS TO HEALTH INSURANCE COVERAGE COULD BE AFFECTED AFTER YOUR DIVORCE IS FINAL. READ THIS NOTICE CAREFULLY. IF YOU DO NOT UNDERSTAND THIS NOTICE, YOU SHOULD CALL AN ATTORNEY FOR ADVICE ABOUT YOUR LEGAL RIGHTS AND OBLIGATIONS.

IMPORTANT INFORMATION IF YOU ARE ON YOUR SPOUSE'S INSURANCE PLAN: When a Petition for Dissolution of Marriage (papers for a divorce decree) is filed, you and/or your children may continue to be covered under your spouse's health insurance policy. Arizona law allows the dependent spouse and/or children to continue to be covered, but you must take some steps to protect your rights.

WHAT INSURANCE COVERAGE APPLIES TO YOU, AND HOW TO GET IT: If you are covered by your spouse's health insurance, and you want to continue to be covered after the divorce is final, you **must** contact the insurance company as soon as possible, and you **must** start to pay the monthly insurance premium within 31 days of the date the insurance would otherwise stop.

If you decide you want to be covered, the insurer can choose whether to continue coverage under the current policy, or to change the policy to your name. If the policy is changed to your name, it is called a "converted"; policy. If the policy is converted by the insurer, the insurer must provide you the same or the most similar level of coverage available, unless you ask for a lower level of coverage.

WHAT COVERAGE APPLIES TO YOUR CHILDREN: If you choose to continue coverage as a dependent spouse, you can also choose to continue coverage for your dependent children if you are responsible for their care or support.

PREEXISTING CONDITIONS OR EXCLUSIONS FROM INSURANCE COVERAGE: Whether the insurance is continued or converted, the insurance must be provided to you without proof of insurability and without exclusions for coverage other than what was previously excluded before the insurance was continued or converted.

LIMITS ON RIGHTS TO INSURANCE COVERAGE FOR YOU AND YOUR CHILDREN: You may **not** be entitled to continued or converted coverage if you are eligible for Medicare or for coverage by other similar types of insurance which together with the continued coverage would make you over-insured. However, dependent children of a person who is eligible for Medicare may be covered by a continuance or a conversion. If you have questions about coverage, check with the insurer and/or the spouse's employer.

OTHER OPTIONS FOR COVERAGE: Divorce is considered to be a life changing event that, under the federal Consolidated Omnibus Budget Reconciliation Act ("COBRA"), may qualify you and/or your dependents with the right to continue health coverage under the spouse's group plan, if the employer has 20 or more employees. To find out more about your COBRA rights, you can visit the United States Department of Labor ("USDOL") website at https://www.dol.gov/ and search for COBRA, or you can call the USDOL at 1-866-487-2365. Divorce is also a life-changing event under the federal Affordable Care Act, which qualifies you and/or your dependents for a special enrollment period to obtain an individual health insurance policy regardless of any health conditions. Additional information is available at https://www.healthcare.gov/ or by calling 1-800-318-2596.

WARNING TO THE SPOUSE FILING THE PETITION FOR DISSOLUTION (DIVORCE): This Notice must be served on your spouse together with the Petition for Dissolution, the Summons, and the Preliminary Injunction.

For Clerk's Use Only

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**

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

_____
Name of Petitioner

Case Number:_____

NOTICE REGARDING CREDITORS

_____
Name of Respondent

ARIZONA LAW REQUIRES all actions for DIVORCE or LEGAL SEPARATION to include this NOTICE and for the person filing for Divorce or Legal Separation to SERVE this NOTICE on the other party. (ARS §25-318(F)).

YOU AND YOUR SPOUSE ARE RESPONSIBLE FOR COMMUNITY DEBTS. The court usually requires/orders one spouse or the other to pay certain community debts in, or through, the Decree of Dissolution or Legal Separation. A court order that does this is binding on the spouses **only, not the creditors**. You and your spouse are legally responsible for these community debts whether you are married, divorced, or legally separated. These debts are matters of contract between **both of you** and your creditors (such as banks, credit unions, credit card companies, utility companies, medical providers and retailers). On request, the court may impose a lien against the separate property of a spouse to secure payment of certain community debts.

CONTACT CREDITORS: You may want to contact your creditors to discuss the debts and the effects of your divorce/legal separation on your debts. To assist you in identifying your creditors, you may obtain a copy of your spouse's credit report by making a written request to the court for an order requiring a credit reporting agency to release the report to you. The credit report will help you identify accounts, account numbers and account balances. In addition, within thirty **(30)** days after receipt of a request from a spouse who is party to a divorce or legal separation, which includes the court and cause number of the action, creditors are required, by law, to provide information as to the balance and account status of any debts for which you or your spouse may be liable to the creditor.

WARNING: If you do not understand this notice, you should contact an attorney for advice about your legal rights and obligations.

The following page contains a sample form you *may* choose to mail to creditors to get information about debts owed by you or your spouse. It is not a required form. DO NOT FILE THE *NEXT* PAGE WITH THE COURT.

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Case No. _____

REQUEST FOR ACCOUNT INFORMATION FROM CREDITORS

You may use this form to request information about debt owed by you or your spouse. If so, send to the creditor. **DO NOT FILE THIS PAGE WITH THE COURT**.

DATE:_____

CREDITOR'S NAME:_____

CREDITOR'S ADDRESS:_____

Regarding: Superior Court of Arizona in Maricopa County

Case Name:_____

Case Number:_____

Pursuant to Arizona State Law (ARS §25-318), this letter requests the balance and account status of any debt for which the following individuals may be liable to you. (Arizona law requires that you provide this information within thirty (30) days of receipt of this letter.)

INFORMATION ABOUT DEBTORS/SPOUSES:

Your Name:_____

Your Address:_____

_____

Your Phone Number:_____

Your Spouse's Name:_____

Your Spouse's Address:_____

INFORMATION ABOUT THE ACCOUNT:

Account Number(s):_____

If you have any questions or if I can be of further assistance, please feel free to contact me.

Sincerely,

Your name:_____

Your signature:_____

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