

TO ESTABLISH
CHILD SUPPORT

Do not copy
or file this page

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To Get The First Court Order

Part 1: Completing and 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 “Calculate Child Support”, or you may make an appointment with the Clerk of Court to calculate support for you for a fee.

SELF-SERVICE CENTER

ESTABLISH THE FIRST COURT ORDER FOR CHILD SUPPORT

CHECKLIST

You may use the forms and instructions in this packet if . . .

- ✓ **You want a court order to establish child support and do not already have one, AND**
- ✓ You already have or do not need to establish an order for child custody (now called “legal decision making” in Arizona) or parenting time (*visitation*) *at this time*, **AND**
- ✓ You are the natural or adoptive parent, the legal guardian, or have a court order awarding you custody of the child or children, **OR**
- ✓ You are providing support for or have physical custody (possession) of the child(ren) of the other party, **OR**
- ✓ You are legally married to the other parent and you understand that using this packet will **NOT** result in a court order for legal decision making (custody), parenting time, or spousal maintenance (and you can only request a court order for **all** of the above as part of a legal separation or divorce), **OR**
- ✓ You are not married to the other parent and are seeking support from the father **and paternity has been *legally established*** by either:
 - A court order establishing paternity, **OR**
 - The father’s name is on the child’s birth certificate because, at the time the child was born or afterwards, **both parents signed** an affidavit acknowledging paternity; **AND**
- ✓ You know the name and address of the other party or where the person can be found, so the court papers can be personally served on him or her.

WARNING: If someone *other than you* has court-ordered legal decision making (custody) or if there is an existing child support order involving the same children for whom you are now trying to establish support, you may need to file papers to modify that order instead.

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.

SELF-SERVICE CENTER

PETITION TO ESTABLISH CHILD SUPPORT

PART 1 – COMPLETING AND FILING THE COURT PAPERS (Forms Only)

This packet contains court forms and instructions to file a petition to establish child support. 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	No. Pages
1	DRES1k	Checklist: <i>You may use these forms if . . .</i>	1
2	DRES1ft	Table of Contents (this page)	1
3	DRSDS10f-c	“Family Court/Sensitive Data Cover Sheet - in Cases With Minor Children”	1
4	DRES11f	“Petition to Establish Child Support”	1
5	DRS12f	“Parent’s Worksheet for Child Support”	2

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.

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

Petitioner	Case No. _____
Respondent	ATLAS No. _____

**FAMILY COURT / SENSITIVE DATA
COVERSHEET WITH 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 ARFLP 43(G)(1).

A. Personal Information:	Petitioner	Respondent
Name	_____	_____
Gender	<input type="checkbox"/> Male or <input type="checkbox"/> Female	<input type="checkbox"/> Male or <input type="checkbox"/> 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. Child(ren) Information:			
Child Name	Gender	Child Social Security Number	Child Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. Type of Case being filed - Check only one category. <i>*Check only if no other category applies</i>		Interpreter Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what language? _____
<input type="checkbox"/> Dissolution (Divorce)	<input type="checkbox"/> Paternity	
<input type="checkbox"/> Legal Separation	<input type="checkbox"/> *Legal Decision Maker (Custody)/Visitation	
<input type="checkbox"/> Annulment	<input type="checkbox"/> *Child Support	<input type="checkbox"/> Register Foreign Order
<input type="checkbox"/> Order of Protection	<input type="checkbox"/> Other	

DO NOT COPY THIS DOCUMENT. DO NOT SERVE THIS DOCUMENT TO THE OTHER PARTY.

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

Petitioner (2) Case Number: _____ (3)
vs. PETITION TO ESTABLISH
CHILD SUPPORT

Respondent (2)

I am providing support for or have physical custody of the following child(ren):

(4)	<u>Name (first, middle, last)</u>	<u>Date of Birth</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The other party is the natural or adoptive parent of the child(ren) listed above and has a legal duty to provide support pursuant to A.R.S. § 25-501.

- (5) Paternity for the above-named minor child(ren) common to the above parties was established by:
- Court Order from this county or previously transferred to this county. (A.R.S. § 25-502(c))
 - Affidavit of Acknowledgment filed on or after July 21, 1996 in accordance with A.R.S. § 25-812-814, or § 36-334).
 - Parties were legally married when child(ren) was (were) born, conceived, or adopted.

WHEREFORE, I request that the court take any or all of the following actions.

- A. Order the other party to pay Child Support according to the Basic Child Support Obligation Guidelines and provide other relief as requested in the attached Parent's Worksheet.
- B. Order payment of costs and attorney fees, if appropriate.
- C. Order such other relief as deemed necessary and appropriate by the court.

I have read the foregoing document and the facts therein are true and correct to the best of my knowledge.

DO NOT SIGN UNTIL DIRECTED TO DO SO BY A NOTARY PUBLIC OR A CLERK OF THE SUPERIOR COURT.

(6) _____
Requesting Party

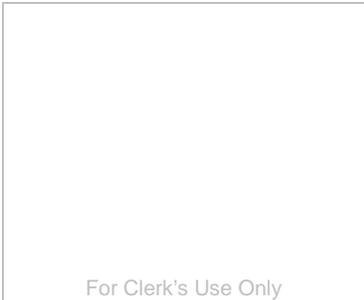
STATE OF _____
COUNTY OF _____

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 MARICOPA COUNTY⁽²⁾

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>FATHER</u>	<u>MOTHER</u>
Gross Income (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)	\$ -
Adjusted Gross Income	\$ _____ (14)	\$ _____
Combined Adjusted Gross Income	(15) \$ _____	
Basic Child Support Obligation	(16) \$ _____	
Plus Costs for:		
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)		\$ _____

Adjustment for Non Custodial Parent's Costs Associated with Parenting Time

Using Table A Table B \$ _____ (26) \$ _____

No. of Days _____ = _____% **Adjustment** (from table)
x Line (16) \$ _____ (Basic Child Support Obligation) \$ _____ (27) \$ _____

Less Noncustodial Parent's Costs for:

Medical/Dental/Vision Insurance*	\$ _____ (28)		\$ _____
Childcare*	\$ _____ (29)		\$ _____
Education Expenses*	\$ _____ (30)		\$ _____
Extraordinary/Special Needs Child Expenses*	\$ _____ (31)		\$ _____

*Subtract here ONLY if ADDED-IN items 17-20 above

Adjustments Subtotal \$ _____ (32) \$ _____

Preliminary Child Support Amount \$ _____ (33) \$ _____

Self Support Reserve Test for Parent Who Will Pay

Amount from Line (14)	_____ (Adj. Gross Inc.)		
Minus Reserve Amount	- \$1,115.00		
Total	=	\$	_____ (34) \$ _____

Child Support to be Paid by: Father Mother \$ (35) \$

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