



**NAME(S) OF MINOR CHILD(REN):**

**BIRTH DATE(S)  
OF MINOR CHILD(REN):**

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(If you need additional space, use the next page.)

To the best of my knowledge, all information is true and correct.

\_\_\_\_\_  
Petitioner or Attorney Signature

## NOTICE

Effective July 1, 1987 and pursuant to Superior Court (Maricopa County) Local Rule 3.1 (a), the Superior Court requests that a "Cover Sheet", which categorizes the cause of action, accompany any new action filed with the Superior Court in Maricopa County. For this reason, this form has been developed. The Cover Sheet will result in increased accuracy of court records and statistics, and in reduced processing time for new case filings.

Copies of this Cover Sheet will be made available at the Probate Registrar's Office for the Clerk of the Superior Court.

**PLEASE DO NOT INCLUDE THIS FORM WITH CASES THAT HAVE ALREADY BEEN FILED.** This form can only be processed **at the time of filing** New Complaints and Petitions.

Thank you for assisting us with our efforts to improve service.