



Name of Person Filing: \_\_\_\_\_  
 In this case I am:  Petitioner  Respondent  
 In this case I am:  Representing Myself (No Attorney), or  
 If Represented by Attorney: Attorney Bar Number: \_\_\_\_\_  
 My Address (if not protected): \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_  
 Telephone Numbers: \_\_\_\_\_  
 ATLAS Number: (if applicable) \_\_\_\_\_

**SUPERIOR COURT OF ARIZONA  
 IN MARICOPA COUNTY**

Case Number: \_\_\_\_\_

\_\_\_\_\_  
 Petitioner (Name) is  Father  Mother

**JUDGEMENT AND ORDER FOR  
 PATERNITY and** (check box if applicable)  
 **LEGAL DECISION MAKING (CUSTODY)**  
 **PARENTING TIME**  
 **CHILD SUPPORT**  
 **VITAL RECORDS** (Check this box if the  
 Department of Vital Records is ordered to change  
 the birth records of a child born in Arizona.)

\_\_\_\_\_  
 Respondent (Name) is  Father  Mother

**THE COURT FINDS:**

1. This case has come before the Court for a final Order. If necessary, the Court has taken any testimony needed to enter a final Order.
2. This Court has jurisdiction over the parties under the law.
3. Where it has the legal power to do so and where it is applicable to the facts of this case, this Court has considered, approved, and made an Order relating to paternity, legal decision making (custody), support, parenting time, and expenses related to birth of the minor child(ren).
4. **SERVICE BY PUBLICATION:**  
 If Respondent was served by publication and was not personally served, this court cannot make a legal order, with respect to issues of child support, medical, dental and vision care insurance and expenses, and expenses for the minor child(ren).

The court reserves jurisdiction until personal service is made upon Respondent to consider the child support, and any other relief requested in the Petition or orders deemed necessary by the court.

**5. Petitioner and Respondent are the natural parents of the minor child(ren) listed below and named on birth certificates as:** (List name as appears on child's birth certificate - if any.)

	First	Middle	Last
(a)	_____		
(b)	_____		
(c)	_____		
(d)	_____		

\*

**who were born on this date and at this place:** (List in same order as above)

	Month/ Day /Year	City, State, and Nation of Birth
(a)	_____	_____
(b)	_____	_____
(c)	_____	_____
(d)	_____	_____

Same information for *additional* children listed on attached page made part of this document by reference

**6. INFORMATION ABOUT THE PARENTS:**

**A. Information about the Mother:**

**The Mother's Complete Name is:**

\_\_\_\_\_

as listed on above-named child(ren)'s birth certificates, or  her current legal name

**Previous Legal Name(s) (if any):**

\_\_\_\_\_

**B. Information about the Father:**

**The Father's Complete Name is:**

\_\_\_\_\_

as listed on his birth certificate, or  his current legal name

**Previous Legal Name(s) (if any):**

\_\_\_\_\_

**Date of Birth:** \_\_\_\_\_  
(Month/Date/Year)

**Place of Birth:** \_\_\_\_\_  
(City, State, Nation of Birth)

**6. PARENT INFORMATION PROGRAM.**

**A. Mother**  **has attended** the Parent Information Program as evidenced by the Certificate of Completion in the Court file, **OR**

**Mother**  **has not attended** the Parent Information Program and  shall be denied any requested relief to enforce or modify this Order until Mother has completed the class.

**B. Father**  **has attended** the Parent Information Program as evidenced by the Certificate of Completion in the Court file, **OR**

**Father**  **has not attended** the Parent Information Program and  shall be denied any requested relief to enforce or modify this Order until Father has completed the class.

**7. DEVIATION FROM CHILD SUPPORT.** The Court, having considered the best interests of the child(ren), deviates from the guidelines for the following reasons:

- Application of the guidelines is inappropriate.**
- Application of the guidelines is unjust.**
- The parties have signed a written agreement with knowledge of the amount of support that would have been ordered by the guidelines if there was no agreement.**

**THE COURT MAKES THE FOLLOWING FINDING REGARDING THE DEVIATION:**

- The child support order *would have been*:**     \$ \_\_\_\_\_
- The child support order after deviation is:**     \$ \_\_\_\_\_
- All parties have signed the agreement free of duress and coercion.**

**8. PHYSICAL CUSTODY ADJUSTMENT, COURT APPROVED DISCRETIONARY PARENTING TIME ADJUSTMENT AND/OR OTHER ADJUSTMENTS. (THE COURT MUST MAKE WRITTEN FINDINGS IF ANY OF THESE ADJUSTMENTS ARE MADE.)**

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**The court finds that the person responsible for paying child support has the ability to pay child support:**

- In the amount entered on Line **33** of the Worksheet for \$ \_\_\_\_\_
- In an adjusted amount calculated using the self-support reserve on line **35** of the Worksheet for \$ \_\_\_\_\_

**THE COURT FURTHER FINDS:**

**9. DOMESTIC VIOLENCE:**

**YOU MAY SKIP "9" IF THERE HAS BEEN NO DOMESTIC VIOLENCE AND THIS IS AN UNCONTESTED COURT ACTION (meaning no response was filed). You must COMPLETE "9" if (a) legal decision making (custody) is contested, or (b) there has been domestic violence between the parties and legal decision making (custody) is to be awarded to or shared with a parent who has committed domestic violence.**

A. Domestic Violence  has OR  has not occurred between the parties;

B.  Domestic Violence has occurred between the parties, but:  
1.  it was mutual (committed by both parties), (see A.R.S. § 25-43.03(D)) or  
2.  it is otherwise still in the best interests of the minor child(ren) to grant joint or sole legal decision making (joint or sole custody) to a parent who has committed domestic violence *because:* (EXPLAIN)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10. SUPERVISED OR NO PARENTING TIME:**

(Check and complete *only if* supervised or no parenting time is ordered.)

NO Parenting Time or  Supervised Parenting Time with the  Father  Mother, is in the best interests of the minor child(ren), for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**12. DRUG or ALCOHOL CONVICTION WITHIN LAST TWELVE MONTHS:**

(Check box if applicable).

Father and/or  Mother has been convicted of driving under the influence of alcohol or drugs, or was convicted of any drug offense within 12 months of filing the request for legal decision making (custody), **however** the legal decision making (custody) and/or parenting time arrangement ordered by this Court appropriately protects the minor child(ren).

**THE COURT ORDERS:**

1. **PATERNITY:** (Name of father as on his birth certificate or  his current legal name)

is the natural father of the minor child(ren).

FOR ANY CHILDREN BORN IN THE STATE OF THE ARIZONA, THE CLERK OF COURT SHALL FORWARD A COPY OF THIS ORDER TO THE OFFICE OF VITAL RECORDS, WHICH IS ORDERED TO AMEND THE BIRTH CERTIFICATE(S) AS FOLLOWS:

2.  The father's name shall be entered on the minor child(ren)'s birth certificate.

3.  The minor child(ren)'s last name shall be changed to: \_\_\_\_\_

4. **PRIMARY RESIDENCE, PARENTING TIME, and LEGAL DECISION MAKING (Custody)**

**A. PRIMARY RESIDENTIAL PARENT:**

Mother's home as primary residence for following named child(ren):

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Father's home as primary residence for following named child(ren):

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**B. SUBJECT TO PARENTING TIME AS FOLLOWS:**

Reasonable parenting time rights to the non-primary residential parent as described in the Parenting Plan attached as Exhibit B and made a part of this decree, OR

NO PARENTING TIME RIGHTS to  Mother OR  Father, OR

SUPERVISED PARENTING TIME to  Mother OR  Father according to the terms of the Parenting Plan attached as Exhibit B and made part of this Decree. Parenting time may only take place in the presence of another person, named below or otherwise approved by the court.

(IF supervised) Name of person to supervise (Optional):

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The cost of supervised parenting time shall be paid by the:

the Mother,  the Father, OR  Shared equally by the parties

**THE COURT FURTHER ORDERS** these restrictions on parenting time (if applicable):

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**C. LEGAL DECISION MAKING (Custody):**

**Award legal decision making concerning the child(ren) (custody) as follows:**

**SOLE LEGAL DECISION-MAKING (sole custody) to:**  **Mother**  **Father**

**OR**

**JOINT LEGAL DECISION MAKING (joint custody) to BOTH PARENTS.**

**Mother and Father** will agree to act as joint legal decision makers (joint legal custodians) of the minor children, as set forth in the **Joint Legal Decision Making** (joint custody) **Agreement** contained in the **Parenting Plan**, to be agreed upon and signed by both parties **if** the Court adopts the terms of the **Agreement**. There have been no significant acts of domestic violence, as defined by Arizona law, A.R.S. § 13-3601, by either parent or it is in the best interests of the minor child(ren) to award joint custody despite any violence that occurred.

**5. CHILD SUPPORT:**

**FATHER** or  **MOTHER** shall pay child support to the other party in the amount of \$\_\_\_\_\_ per month, beginning THE FIRST DAY OF THE MONTH following the signing of this Decree, according to the Child Support Worksheet. All child support payments shall be made through the Support Payment Clearinghouse, plus an applicable statutory fee.

Payments shall be in equal installments made on the **1st** and **15th** of each month thereafter through an automatic wage assignment.

Costs for past child support and care for minor child(ren) in the amount of \$\_\_\_\_\_ shall be paid by  **FATHER** or  **MOTHER** in the amount of \$\_\_\_\_\_ each month until paid in full. Payments shall be made as stated above.

**6. MEDICAL/DENTAL/VISION CARE INSURANCE EXPENSES FOR CHILDREN**

FATHER is ordered to provide  medical,  dental  vision care insurance.

MOTHER is ordered to provide  medical,  dental  vision care insurance.

The party ordered to pay for medical/dental/vision care insurance must keep the other party informed of the insurance company's name, address, and telephone number, and provide the other party with the documents necessary to submit insurance claims.

**FATHER** is ordered to pay \_\_\_\_\_% and/or

**MOTHER** is ordered to pay \_\_\_\_\_% of all reasonable uncovered and/or uninsured medical, dental, vision care, prescription, and other health care expenses for the minor child(ren), including co-payments.

Costs for past medical expenses for minor child(ren) in the amount of \$\_\_\_\_\_ shall be paid by  **FATHER** or  **MOTHER** in the amount of \$\_\_\_\_\_ each month until paid in full. Payments shall be made as stated above.

**7. OTHER COSTS:**  **FATHER** or  **MOTHER** is awarded judgment in the

amount of \$\_\_\_\_\_ for expenses incurred relating to medical care, hospitalization and other costs related to the birth of the minor child(ren), which shall be paid by

**FATHER** or  **MOTHER**.

**8. FINANCIAL INFORMATION EXCHANGES:** The parties shall exchange financial information (tax returns, spousal affidavits, earning statements and/or other related financial statements) every twenty-four months.

9. **LIMITATION ON JURISDICTION:** (check box if applicable)  
 This Court cannot make a legal order, without personal service on \_\_\_\_\_ (the other party) with respect to issues of child support, medical and dental insurance for the minor child(ren) or regarding costs relating to the birth of the child(ren). The court reserves jurisdiction to enter further orders at such time as the Court acquires personal jurisdiction over the Respondent.

10. **OTHER ORDERS:** This Court makes further Orders relating to this matter as follows:  
\_\_\_\_\_  
\_\_\_\_\_

**FINAL APPEALABLE ORDER.** Pursuant to Arizona Rules of Family Law Procedure, Rule 81, this final judgment/decreed is settled, approved and signed by the court and shall be entered by the clerk.

DONE IN OPEN COURT \_\_\_\_\_

\_\_\_\_\_  
JUDICIAL OFFICER

**ACKNOWLEDGEMENT OF THE PARTIES OR THEIR ATTORNEYS**

**APPROVED BY:**

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

Signed and sworn to or affirmed before me this date: \_\_\_\_\_ by: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

Michael K. Jeanes, Clerk of Superior Court

OR

My commission expires: \_\_\_\_\_

By: \_\_\_\_\_

Deputy Clerk

**If you are filing a Consent Decree or if there has been a trial, the Respondent must sign:**

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

Signed and sworn to or affirmed before me this date: \_\_\_\_\_ by: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

Michael K. Jeanes, Clerk of Superior Court

OR

My commission expires: \_\_\_\_\_

By: \_\_\_\_\_

Deputy Clerk

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

Petitioner's Lawyer: \_\_\_\_\_ Date: \_\_\_\_\_

Respondent's Lawyer: \_\_\_\_\_ Date: \_\_\_\_\_