

FROM:

Your Name _____
Mailing Address: _____
City, State, Zip Code: _____
Telephone Number _____ / _____

TO: (List name and address of the other party's employer or other source of income.)

Name: _____
Mailing Address: _____
City, State, Zip Code: _____
Telephone Number _____ / _____

Today's Date: _____

In the Matter of: _____ **Case No.** _____
(print title of your case (example: Jones v. Jones))

Regarding Information Required by Arizona Revised Statutes § 25-513

My name is _____ **(print your name clearly). I am involved in a court case with the person named below as "Other Party".**

Information about Other Party:

Other Party's Name: _____
Other Party's Social Security No. (if known): _____
Other Party's Date of Birth (if known): _____

Under Arizona Revised Statutes § 25-513, I am entitled to certain information about how much income the other party receives each month, and the other information requested below.

Please provide the information indicated by the boxes checked below:

- Present and past employment status of the other party;
- Earnings, income, or other monies without regard to the source, of the party;
- Assets;
- Availability and description of present, or previous, health insurance coverage for a dependent child;
- The other party's current or last known address, unless protected by an order of protection or injunction against harassment or other court order.

Please note that Arizona law (A.R.S. §25-513) requires that you send this information to me within 20 days from the date you receive this request. Thank you for your help in this matter.

Sincerely,

(Your Signature)