

Name: _____
Mailing Address: _____

Daytime Telephone _____
Representing Self, Without a Lawyer



IN THE SUPERIOR COURT OF ARIZONA, YAVAPAI COUNTY

Regarding the matter of _____ 1300DO _____

ATLAS #: _____

Petitioner

**PETITION FOR ORDERS OF
PATERNITY, LEGAL DECISION-
MAKING, PARENTING TIME
AND CHILD SUPPORT**

and

Respondent

STATEMENTS TO THE COURT, UNDER OATH

1. INFORMATION ABOUT ME, THE PETITIONER

Name: _____ Date of Birth _____

Address: _____

Occupation: _____

My relationship to the child(ren) for whom I request orders of Paternity, Legal Decision-Making, Parenting Time and Child Support:

- Mother
- I claim to be the Father
- I am a Court-appointed guardian, conservator or "best friend" of the child(ren) who were **born out of wedlock**.

The Petitioner is enlisted in the military and has **OR** has not been deployed for at least one day during the past 6 months.

2. INFORMATION ABOUT THE RESPONDENT

Name: _____ Date of Birth _____

Address: _____

Occupation: _____

My relationship to the child(ren) for whom I request orders of Paternity, Legal Decision-Making, Parenting Time and Child Support:

- Mother
- He claims to be the Father

The Respondent is enlisted in the military and has **OR** has not been deployed for at least one day during the past 6 months.

3. WHY I AM FILING THIS COURT CASE AGAINST THE RESPONDENT IN ARIZONA: (Check one or more boxes that are true.)

- The Respondent is a resident of Arizona
- I will **personally serve** the Respondent in Arizona. (see packet on service to learn how to do this.)
- The Respondent agrees to have the case heard here and will file written papers in the case.
- The Respondent lived with the child(ren) in Arizona at some time.
- The Respondent lived in Arizona and provided pre-birth expenses or support for the child(ren).
- The child lives in Arizona as a result of the acts or directions of the Respondent.
- The Respondent had sexual intercourse in Arizona as a result of which the child(ren) may have been conceived.
- The Respondent did any other acts that substantially connect the Respondent with Arizona **(see a lawyer to help you determine this).**

4. INFORMATION ABOUT THE CHILD(REN) FOR WHOM I REQUEST ORDERS:

Child's Name: _____

Birth date: _____

Address: _____

Length of time at address: _____

Names and addresses of persons lived with for the past five (5) years: _____

Present addresses of person(s) lived with: _____

Child's Name: _____

Birth date: _____

Address: _____

Length of time at address: _____

Names and addresses of persons lived with for the past five (5) years: _____

Present addresses of person(s) lived with: _____

5. LEGAL DECISION-MAKING OR PARENTING TIME CASES INVOLVING THE MINOR CHILD(REN):

I HAVE I HAVE NOT been a party or a witness in court, in this state or any other state, involving the legal decision-making or parenting time of any child(ren) named above. (If so, explain below, using extra pages if necessary.)

Name of child: _____
Court state: _____ Court location: _____
Court case number: _____ Status: _____
How the child is involved: _____
Summary of any court order: _____

6. PENDING/PAST CASES RELATED TO MINOR CHILD(REN): (check one box)

I DO I DO NOT know of any court case, in this state or any other state, that could affect this case, including enforcement, domestic violence, protective orders, drugs, sexual offenses, termination of parental rights and adoptions. (If so, explain below, using extra pages if necessary.).

Court state: _____ Court location: _____
Court case number: _____ Status: _____
Nature of the proceeding: _____

7. LEGAL DECISION-MAKING OR PARENTING TIME CLAIMS OF ANY OTHER PERSON:
(Check one box)

I KNOW I DO NOT KNOW the name and address of any person, other than the Petitioner or the Respondent, who provides primary physical residence for the child(ren) or claims rights of legal decision-making, primary physical care, or parenting time of any child(ren) named above. (If so, explain below, using extra pages if necessary.)

Name of each child: _____
Name of person with the claim: _____
Address of person with the claim: _____
Nature of the claim: _____

STATEMENTS ABOUT PATERNITY:

8. WHY I THINK _____ IS THE FATHER OF THE CHILD(REN):
Name of purported father

(Check which box applies. More choices on next page.)

AFFIDAVIT: Petitioner and Respondent signed an Affidavit of Paternity acknowledging that Petitioner Respondent is the child(ren)'s natural father. **A certified copy is attached to this Petition.**

BLOOD TEST: The parties had DNA (Deoxyribonucleic Acid) Testing administered and _____ is shown to be the minor child(ren)'s natural father. **A copy of the report is attached to this Petition.**

PARTIES LIVING TOGETHER: Petitioner and Respondent were not married to each other at any time during the ten months before birth of the child(ren). However, the parties lived together during the period(s) when the child(ren) could have been conceived.

SEXUAL INTERCOURSE: Petitioner and Respondent were not living together but had sexual intercourse at the probable date of conception of the child(ren). The mother of the child(ren) did not have sexual intercourse with anyone else during the period in which the child(ren) could have been conceived.

OTHER (explain) _____

9. ABOUT MARRIAGE AND HUSBAND -- check one box.

Mother **was not married** at time child(ren) were born or conceived or at least 10 months before child(ren) were born or conceived, **OR**

Mother **was married** when child(ren) were born or conceived or at least 10 months before child(ren) were born or conceived, but husband is not father of child(ren). Husband is a party to this court case because of marriage.

OTHER STATEMENTS TO THE COURT:

10. MEDICAL EXPENSES: THERE ARE THERE ARE NOT unreimbursed medical expenses incurred by the mother, resulting from the birth of the minor child(ren). If there are, these costs and expenses should be awarded to PETITIONER RESPONDENT according to A.R.S. § 25-320.

11. OTHER EXPENSES: The parties should be ordered to divide between them any uninsured medical, dental, or health expenses, reasonably incurred for the minor child(ren), in proportion to their respective incomes.

12. The Attorney General's office is involved in this case (TANF, IV-D, etc.).

13. WRITTEN AGREEMENTS. CHECK ONLY IF TRUE:

For our child(ren), my spouse and I have a written agreement signed by both of us about:

Legal Decision-Making;

Parenting time;

Child support.

My spouse and I have a written agreement not related to the child(ren) and signed by both of us about _____.

I am filing the **ORIGINAL** Agreement.

14. VENUE: This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the Petitioner or the Respondent or the child(ren).

REQUESTS I MAKE TO THE COURT IN THIS CASE:

- 1. **PATERNITY:** Order that _____ is the natural father of the minor children;
Name of purported Father
 - 2. **BIRTH CERTIFICATE:** (Mark the box and complete if you want this)
 Order that _____ name be added to each child's birth certificate;
Name of purported Father
 - 3. **LAST NAME:** (Mark the box and complete if you want this)
 Order that each child's last name be changed to _____.
 - 4. **LEGAL DECISION-MAKING FOR THE CHILD(REN):**
 SOLE LEGAL DECISION-MAKING: Sole legal decision-making for of the minor child(ren) awarded to Petitioner or Respondent subject to parenting time for the non-legal decision-making parent as follows:
 - 1. Reasonable parenting time pursuant to the Yavapai County Parenting Time Guidelines;
 - 2. Reasonable parenting time pursuant to the attached Parenting Plan;
 - 3. **Supervised parenting time.** Supervised parenting time is in the best interest(s) of the child(ren) because unrestricted parenting time would seriously endanger the child(ren)'s physical, mental, moral or emotional health. These facts support my claim: _____

 - Name of person who will supervise _____
 - The cost of supervised parenting time shall be paid by Petitioner **OR** Respondent **OR** shared equally.
 - 4. **No parenting time: (check and explain ONLY if you want the other party to have no parenting time):** No parenting time between the child(ren) and the other party is in the best interests of the child(ren) because any parenting time would seriously endanger the child(ren)'s physical, mental, moral or emotional health. These facts support my claim: _____

- OR**
- JOINT LEGAL DECISION-MAKING:** Petitioner and Respondent agree to act as joint legal decision-makers for the minor child(ren) as set forth in the Joint Legal Decision-Making Agreement. **(A Joint Legal Decision-Making Agreement signed by both parents must be attached) AND**
 - Domestic violence has not occurred during this relationship;
- OR**

Domestic violence has not been significant. However, domestic violence has occurred as described in the Petition for Order of Protection(s) filed _____ or as described below:

OR

Joint legal decision-making is in the best interest of the child(ren) even though domestic violence has occurred because _____

Furthermore, the Petitioner **AND/OR** Respondent has/have taken classes, participated in counseling or taken steps to avoid further domestic violence as described below: _____

5. **CHILD SUPPORT:** Support payments will begin _____ following the entry of the Order. These payments, and a fee for handling, will be paid through the Clerk of the Court/Clearinghouse and collected by automatic wage assignment.

Order that child support shall be paid by Petitioner **OR** Respondent in a reasonable amount as determined by the Court under the Arizona Child Support Guidelines and according to the Parent's Worksheet, which shall be filed with this Petition.

OR

Order that child support be paid in an amount that deviates from the Guidelines because:

Application of the Guidelines is inappropriate or unjust because _____

The parties have signed a written agreement free of duress and coercion with knowledge of the amount of support that would have been ordered by the Guidelines but for the agreement. A copy of the agreement is attached.

Order that costs for past child support for child(ren) in the amount of \$_____ shall be paid by PETITIONER RESPONDENT at the rate of \$_____ per month until paid in full. Payments shall be made as stated above.

6. **EXPENSES OF MOTHER:**

Order that PETITIONER **OR** RESPONDENT pay a reasonable amount to cover unreimbursed expenses incurred by the mother related to the birth of the child(ren).

7. **HEALTH, MEDICAL AND DENTAL INSURANCE AND HEALTH CARE EXPENSES FOR CHILD(REN):**

Order that PETITIONER **OR** RESPONDENT shall pay for health, medical, dental insurance coverage for the child(ren) under the age of 18 years, and that the Petitioner **and** Respondent shall pay for all reasonable unreimbursed medical, dental, health-related expenses incurred for the child(ren) in proportion to their respective incomes as described on the Parents' Worksheet for Child Support Amount.

8. TESTING and COSTS:

Order that if paternity is contested, Petitioner and Respondent be ordered to submit to such blood and tissue tests as may be deemed necessary by this Court to establish paternity, **AND** that Respondent must pay all costs and expenses of this lawsuit under Arizona law, if he/she contests these proceedings and the Court rules in favor of Petitioner, including the costs of the blood tests or other genetic testing; filing each child's birth certificate; attorney's fees and court costs.

9. OTHER ORDERS I AM REQUESTING (explain request here):

OATH AND VERIFICATION OF PETITIONER

STATE OF ARIZONA)
County of _____)

I, the Petitioner, being duly sworn and under oath, state that I have read this Petition. All the statements in the Petition are true, correct and complete to the best of my knowledge and belief.

SIGNED: _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____,
by the Petitioner, _____.

My Commission Expires: _____

Notary Public