iling Address (if not protected): _ /, State, Zip Code: one Number: ail Address: oresenting □ Self or □ Attorney ttorney, Lawyer's Bar Number: _	y for	
ARIZONA SUPERIO	·	- YAVAPAI
me of Petitioner	PROPOSED RE STATEMENT O PETITIONER RESPONDE	0F R
me of Respondent	 Date of Marriag	e:
e undersigned party provides the SPECIFIC.	e following position on each of th	ne issues in this case.
IV-D Case:		
	•	include AFDC, TANF,
☐ I have a case with the Di	ivision of Child Support Services	
or adopted child(ren) in com	nmon. (If there are no minor o	
Child(ren)'s Name(s)	Date(s) of Birth	Age(s)
	iling Address (if not protected): //, State, Zip Code: Done Number: ail Address: Dresenting Self or Attornettorney, Lawyer's Bar Number: Marizona Superior The of Respondent The of Respondent The undersigned party provides the SPECIFIC. IV-D Case: I receive, or have receive or AHCCCS for my child or AHCCCS for my child have a case with the December of Legal Decision-Making and Perior adopted child(ren) in common to the parties, skip to the common to the co	PROPOSED RESTATEMENT COMPANDED PROPOSED RESTATEMENT COMPANDED PROPOSED RESTATEMENT COMPANDED PROPOSED RESPONDED PROPOSED RESPONDED PROPOSED RESPONDED PROPOSED RESPONDED PROPOSED RESPONDED PROPOSED PROP

Case No
The child(ren) should live primarily with \square Petitioner \square Respondent and have arenting time with \square Petitioner \square Respondent as follows (check all that apply):
☐ Generally, in accordance with Yavapai County Guidelines for reasonable parenting time.
□ Every other weekend from (day) at a.m./ p.m. to (day) at a.m./ p.m.
☐ One-half of the holiday/school break/vacation on an alternating basis.
☐ For weeks in the summer from to to (inclusive).
☐ Spring Break from school.
☐ Fall Break from school.
☐ Winter Break from school.
□ Other:
☐ Petitioner or ☐ Respondent should have sole legal decision-making,
OR
☐ Petitioner and Respondent should have joint legal decision-making.
Child Support: (If there are no minor or disabled children common to the parties and vere no minor or disabled children from the date the parties separated, skip to aragraph 5.) The financial factors necessary to calculate child support under the Arizona Child Support Guidelines are as follows (complete in full):
Petitioner's gross monthly income: \$
Respondent's gross monthly income: \$

and who live(s) in their household.

supporting and who live(s) in their household.

3.

Petitioner has _____ other child(ren) not listed above who they are supporting

Petitioner has _____ other child(ren) not listed above for whom they pay court-

Respondent has _____ other child(ren) not listed above who they are

Respondent has _____ other child(ren) not listed above for whom they pay

ordered child support in the amount of \$ per month.

court-ordered child support in the amount of \$_____ per month.

	Medical insurance should be paid by \square Petition cost for the child(ren) in this case is \$	· · · · · · · · · · · · · · · · · · ·			
	Dental insurance should be paid by \square Petitioner for the child(ren) in this case is $\$$	☐ Respondent. Monthly cost			
	Vision insurance should be paid by \square Petitioner [for the child(ren) in this case is $\$$	☐ Respondent. Monthly cost			
	Neither parent has insurance which is accessible a cost.	and available at a reasonable			
	$\ \square$ Petitioner $\ \square$ Respondent should pay cash me	dical support in the amount of			
	\$ per month.				
	Monthly child care costs for child(ren) in thi	s case are \$			
☐ Extra education expenses or extraordinary child adjustments - I belie court should add the following to the child support calculation (leave bla none claimed):					
	Description of Expense	Monthly Amount			
		\$			
		\$ \$			
		\$			
	Uninsured medical/dental/vision expenses should	be paid:			
	☐ Pro rata based upon each party's income, a or	s provided in the Guidelines;			
	☐ Other:% paid by Petitioner and	% paid by Respondent.			
	Tax exemptions for the child(ren) should be divide	ed (choose one):			
	□ Pro rata based upon each party's income, a or	s provided in the Guidelines;			
	□ Other:				
<u>Pas</u>	$rac{1}{2}$ should be paid by \square Petitioner \square Re	espondent for the period of			
	(date) through	(date) in the			

amount of \$ _____.

4.

Case No.

Case N	^		
Case IV	u.		

5.	Spousal Maintenance: My position on spousal maintenance is (choose one):								
		No spous	al mainte	enance ne	eds to be p	paid by me	or my spo	ouse.	
		I should p	ay my s	pouse \$ _		per month	for	mo	nths.
		My spous	e should	d pay me \$		per mo	nth for		months.
6.	_	arate Prop cribe):	erty: I be	elieve the f	ollowing p	operty is m	y sole and	d separat	e property
7.					operty: I b erty of my s	elieve I hav spouse:	e a comm	unity inte	rest in the
8.	pers	nmunity Propections:			vide all of t	he commu	nity prope	rty (excep	ot tangible
			List a sl	nort descri	ntion of ea	ch item of r	eal and n	ersonal n	roperty
			List you	r estimate	of the fair	market values t(s) on the	ue of each	item of p	oroperty.
	C	Column 3:	List the Petition		net value	of each iter	n you pro	pose for	
	C	Column 4:	List the Respon		net value	of each iter	n you pro	pose for	

Real Property Description (real estate, land, houses, etc.)	Fair Market Value (less amount owed)	Value proposed for Petitioner	Value proposed for Respondent
a)	\$		
Amount owed on this property:	-	\$	\$
b)	\$		
Amount owed on this property:	-	\$	\$
c)	\$		
Amount owed on this property:	-	\$	\$
d)	\$		
Amount owed on this property:	-	\$	\$

Personal property description (e.g. stocks, bonds, life insurance, etc.)	Fair Market Value (amount owed)	Value proposed for Petitioner	4. Value proposed for Respondent
a)	\$		
Amount owed on this property:	-	\$	\$
b)	\$		
Amount owed on this property:	-	\$	\$
c)	\$		
Amount owed on this property:	-	\$	\$
d)	\$		
Amount owed on this property:	-	\$	\$
1. Pensions including Survivor Benefits, IRAs, Roth IRAs	Fair Market Value (amount owed)	Value proposed for Petitioner	Value proposed for Respondent
a)	\$		
Amount owed on this property:	-	\$	\$
b)	\$		
Amount owed on this property:	-	\$	\$
c)	\$		
Amount owed on this property:	-	\$	\$
1. Vehicle(s)	2. Fair Market Value (amount owed)	3. Value proposed for Petitioner	4. Value proposed for Respondent
a)	\$		
Amount owed on this property:	-	\$	\$
b)	\$		
Amount owed on this property:	-	\$	\$
c)	\$		
Amount owed on this property:	-	\$	\$
1. Boat(s)			
a)	\$		
Amount owed on this property:	-	\$	\$
b)	\$		
Amount owed on this property:	-	\$	\$

Case N	^		
Case IV	u.		

9.	<u>Tangible Personal Property</u> . I believe that the value of the tangible personal property (household furniture, furnishings, jewelry etc.) in the possession of each party is as follows:						
		ner has tangible personal property in their possession valued at approximately					
		ndent has tangible personal property in their possession valued at imately \$					
		ference for dividing the tangible personal property is to (list your order of nce 1 – 5 with 1 being most important and 5 being the least):					
	Each party should keep the tangible personal property currently possession with the exception of the following items I want from my s						
		An equalization payment/credit should be made based upon the above values so each of us gets the same value.					
		We should make a list of all the tangible personal property and alternately select items from the list until all the property is divided.					
		One of us should make two (2) lists of tangible personal property both equal in value, and the other one be awarded all property on the list of their choice.					
		Other:					
10.	Debts:	The community debts should be divided as follows (complete in detail):					
		I the debt should be paid% by Petitioner and% by espondent; or					
		ach of us should pay the following debts and amounts:					

Creditor	Total owed	Amount to be paid by Petitioner	Amount to be paid by Respondent
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

11.		rney's Fees: If the		•	•	choose one):
		Each of us is to pa	•	•		
			pay \$	of my at	torney's fees and co	osts within
		days.				
			to m	y spouse for at	torney's fees and co	osts within
		days.				
12.	<u>Nar</u>	ne Change: I want i	my name cha	inged to:		
13.		er Issues: Briefly sta le this case:	ate the other i	ssues that you	believe must be res	olved to fully
14.	opp resc con stat sett pre	clement: I understar osing party and the olve as many issues tact order, or a histo ements are true bate and resolve this obtained to show doof ference or hearing.	eir counsel at as possible ory of domest sed on my b case based u	least five coulunless there is ic violence betweet information upon my position	rt days before my of a current order of poween us. I verify the a and belief, and I approved about the approved the approved about the approved the	court date to rotection, no at the above am willing to ove. I will be
— Date	e			•	☐ Petitioner ☐ Re	•

Case No.

NOTE: You are required to provide a copy to the other party(ies) – or their attorney(s). You must also complete the certificate of service below.
A copy has been \square mailed \square hand-delivered \square emailed (I have written permission) on to: \square Petitioner \square Respondent \square 3 rd Party at the
following address(es):
Name: Address: City, State, Zip: