SUPERIOR COURT OF ARIZONA MOHAVE COUNTY

	Case N	umber:			
(Name of Petitioner)	ATLAS Number: CHILD SUPPORT ORDER A.R.S. §25-503				
AND					
(Name of Respondent)	_				
THE COURT FINDS THAT:					
1. Mother's Name:	Date of Birth:				
		pe omitted if using the Confidential			
Father's Name:	Date of Birth:				
	(*Can be omitted if using the Confidential				
Owe a duty to support the following ch (*Social Security # can be omitted if us		sitive Data Form)			
Child(ren)'s Names(s)	Date of Birth	Social Security #			
DO NOT WRITE BELOW THIS LIN	E. COURT PERSONNEI	L WILL COMPLETE THE FORM			
The required financial factors and any guidelines are as set forth in the Parer incorporated by reference.					
3. ☐ Mother ☐ Father is obligated to p	B. □ Mother □ Father is obligated to pay support to:				
In the amount of: \$	per mo	nth.			
 Deviation (only in applicable cases) Application of the Arizona Child Support guidelines in this case is inappropriate or unjust. The Courbas considered the best interests of the child(ren) in determining that a deviation is appropriate. 					

6/26/09 Page 1 of 4

	The child support amount <u>after deviation</u> is: \$					
	☐ The Court finds the guidelines amount is inappropriate or unjust beca	use: 				
☐ The attached written agreement is made part of this order by reference						
	□ Other Reasons for Deviation from Guideline Amount:					
•	ears					
	Child support arrears exist in the amount of: \$					
F	For the period of: to					
е	rest					
	nterest in the amount of: \$					
F	For the period of: to					
	A judgment for past care and support should be entered in the amount of: S ORDERED THAT:	\$				
	S ORDERED THAT: □ Mother □ Father shall pay child support in the amount of:	\$\$ \$				
	S ORDERED THAT:					
	S ORDERED THAT: □ Mother □ Father shall pay child support in the amount of:	\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to: First payment is due on the 1 st day of:	\$\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$ \$ \$ per month toward child				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$ \$ per month toward child				
	S ORDERED THAT: Mother Father shall pay child support in the amount of: per month, to:	\$ \$ per month toward child \$				

Case No.____

	Case No				
	In the principal amount of:	\$			
	☐ Mother ☐ Father shall pay care and support amount unt	\$	per mor	nth toward the past	
	□ Past care and support not ac				
_					
4.	All payments shall be made through the Support Payment Clearinghouse pursuant to an Order of Assignment signed this date. Any time the full amount of support ordered is not withheld, the person obligated to pay (the obligor) remains responsible for the full monthly amount ordered. Payments not made directly through the Support Payment Clearinghouse may be considered a gift unless you have a notarized affidavit signed by the other party agreeing that he or she received the payment and that it was for child support. All payments not made by Order of Assignment shall be made payable to and mailed directly to:				
	Support Payment Clearingho P.O. Box 52107 Phoenix, AZ 85072-2107	ouse			
	Payments must include the payo	or's name, ATLAS	S number or Social Security Nu	ımber.	
5.	Pursuant to A.R.S. §25-322, the parties shall submit current address information in writing to the Clerk of the Superior court and the Support clearinghouse immediately. The payor shall within 10 days, submit the names and addresses of employers or other persons or organizations from which he or she is entitled to receive payment.				
6.	The parties shall submit address changes within 10 days of the change.				
7.	MEDICAL, DENTAL, VISION CARE INSURANCE FOR MINOR CHILDREN ☐ Mother is responsible for providing ☐ medical ☐ dental ☐ vision care insurance. ☐ Father is responsible for providing ☐ medical ☐ dental ☐ vision care insurance.				
8.	The costs of medical/dental/vision care expenses not paid by insurance shall be shared as follows:				
	Mother%	Father	%		
	Request for payment or reimbur after the services occurred. The days after receipt of the request	obligated paren			
9.	The costs of travel related to pa	renting time over	100 miles one way shall be sh	ared as follows:	
	Mother%	Father	%		
10.	The parties shall exchange financial information such as copies of tax returns, earnings statements, a Parent's Worksheet for child Support Amount, residential addresses and the names and addresses of their employers every 24 months.				
11.	The Court allocates the federal to	ax exemption(s)	for the dependent child(ren) as	s follows:	
	Child's Name	Date of Birth (Month, Day, Year)	Parent Entitled to Deduction	For Calendar Year	
			□ Mother □ Father		
			□ Mother □ Father		
			□ Mother □ Father		
			□ Mother □ Father		

□ Mother □ Father

Date	Judicial Officer
On the child's 18 th birthday When the child is adopted When the child dies	
Although the obligation to pay support may continue, a c On the date of the child's marriage	hild is emancipated:
Pursuant to Arizona Revised Statutes §25-503(I), the righthree years after all children included in the child Support support, the person owed child support must file a court amount before the end of the three-year period. (Limited 320(B)).	t Order have emancipated. To collect the unpaid action to obtain a written judgment for the unpaid
IMPORTANT INFORMATION: If this is a modification of child support, all other prior ord effect.	ers of this Court not modified remain in full force and
For years following those listed above while this child repeat the pattern above of claiming deductions for each	

Case No. _____