

Name of Person Filing: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_  
 Daytime Phone Number: \_\_\_\_\_  
 Evening Phone Number: \_\_\_\_\_  
 ATLAS Number (if applicable): \_\_\_\_\_  
 Attorney Bar Number (if applicable): \_\_\_\_\_  
 Representing:    Self    Petitioner    Respondent

**SUPERIOR COURT OF ARIZONA  
 MOHAVE COUNTY**

Regarding the Matter of:

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

\_\_\_\_\_  
(Name of Petitioner)

**ORDER MODIFYING CHILD CUSTODY,  
 PARENTING TIME ("VISITATION") and  
 CHILD SUPPORT**

AND

\_\_\_\_\_  
(Name of Respondent)

**THE COURT FINDS:**

1. This case has come before this Court to change child custody, parenting time and child support. The Court has taken all testimony needed to enter a final Order.
2. This Court has jurisdiction to modify child custody, parenting time, and support, and has jurisdiction over the parties under the law. 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 Orders relating to child custody, parenting time and support.
3. This Order applies to this/these child(ren):

**NAME(S) OF CHILD(REN)**

**DATE(S) of BIRTH**

(Month)      (Date)      (Year)

_____	_____ / _____ / _____
_____	_____ / _____ / _____
_____	_____ / _____ / _____
_____	_____ / _____ / _____

4. **FOUNDATIONS FOR CHANGING CUSTODY.** (Check one box and describe why the change is in the best interest of the child(ren).

The Order being changed was for joint or sole custody. At least one year has passed since the

earlier joint or sole custody Order was entered. There have been substantial, significant and continuing changes in circumstances that make a change in custody, parenting time and child support in the best interest of the child(ren) for the reasons described below:

**OR**

There has been domestic violence, spousal abuse, or child abuse as described below since the date of the earlier Order, and it is in the best interest of the child(ren) that the change is made for the reasons described below: (Include a description of the domestic violence.)

**OR**

Less than one year has passed since the Order was entered. The child(ren)'s current environment may seriously endanger the child(ren)'s physical, mental, moral or emotional health, the child(ren) is/are at risk under the current Order and it is in the best interest of the child(ren) that custody is changed for the reasons described below: (Include a description of the danger and risk here.)

**OR**

It is in the best interest of the child(ren) that no change to custody is made at this time for the reasons described below.

**REASONS:** (Describe why the custody determination is in the best interest of the child(ren))

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**5. SUPERVISED OR NO PARENTING TIME** (or "visitation, if non-parent"): (if applicable) Supervised parenting time between the child(ren) and Mother or Father or Other , or no Parenting Time by Mother or Father or Other is in the best interests of the child(ren) for the following reasons:

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**THE COURT ORDERS:**

The Order regarding custody, parenting time, and support dated \_\_\_\_\_ is changed as follows:

**A. CUSTODY AND PARENTING TIME**

**Joint Legal Custody.** There have been no significant acts of domestic violence. Mother and Father are hereby awarded joint legal custody of the minor child(ren) subject to Mohave County Parent/Child Access Guidelines or the attached Parenting Plan.

**OR**

**Sole custody** Mother Father is awarded the sole custody of \_\_\_\_\_, subject to parenting time as follows:

- 1. **Reasonable Parenting Time** to the parent who does not have custody according to the Mohave County Parent/Child Access Guidelines. **(OR)**
- 2. **Reasonable Parenting Time** to the parent who does not have custody according to the Parenting Plan attached. **(OR)**
- 3. **Supervised Parenting Time** but only in the presence of another person, who is named below or otherwise approved by the Court.

Name of supervisor: \_\_\_\_\_

Restrictions on Parenting Time: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The cost of supervised Parenting Time shall be paid by:  
Mother or Father or Other - shared equally by the parties. **(OR)**

- 4. **No Parenting Time** rights to Mother or Father or Other.

**B. CHILD SUPPORT**

Mother or Father shall pay child support to the other party in the amount of \$ \_\_\_\_\_ per month payable on the first day of each month, beginning the first day of month following the signing of this Order. Child Support is based on the information in the **"Child Support Worksheet"** attached hereto and incorporated by reference. All child support payments shall be made through the Support Payment Clearinghouse, plus an applicable statutory fee by the attached Order of Assignment.

**CHILD SUPPORT DEVIATION**

The Court, having considered the best interests of the child(ren), deviates from the guidelines for the following reasons: (Describe reasons.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**C. MEDICAL, DENTAL, VISION CARE**

**Petitioner** shall provide: medical dental vision care insurance.

**Respondent** shall provide: medical dental vision care insurance.

Medical, dental, and vision care insurance, payments and expenses are based on the information in the Parent's Worksheet for Child Support attached and incorporated by reference. The party ordered to pay must keep the other party informed of the insurance company name, address and telephone number, and must give the other party the documents necessary to submit insurance claims.

**Non-Covered Expenses:** Petitioner is ordered to pay \_\_\_\_\_ %, AND Respondent is ordered to pay \_\_\_\_\_ % of all reasonable uncovered and/or uninsured medical, dental, vision care, prescription and other health care charges for the minor child(ren), including co-payments.

**D. TAX EXEMPTION**

A parent required to pay child support is only entitled to claim a child as dependent for Federal Income Tax purposes if that parent has paid all of the child support due and owing for the year that party is entitled to the exemption.

**Beginning Tax Year:** \_\_\_\_\_, the right to claim the child(ren) as a deduction for Federal Income Tax purposes is divided as indicated below: "M" for Mother, "F" for Father.

Parent entitled to claim:	Name of Child	Schedule
M      F	_____	Every Year Every Other
M      F	_____	Every Year Every Other
M      F	_____	Every Year Every Other
M      F	_____	Every Year Every Other

**E. MEDIATION**

In the event Mother and Father cannot agree to custody, parenting time, and/or support, the parties are required to seek a private mediator, or Court-provided mediator before starting any Court actions.

**F. OTHER ORDERS**

This Court makes further Orders relating to this matter as follows

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**G. DONE IN OPEN COURT:** \_\_\_\_\_  
(Date)

\_\_\_\_\_  
JUDGE OR COURT COMMISSIONER