

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

**SUPERIOR COURT OF ARIZONA  
 MOHAVE COUNTY**

\_\_\_\_\_  
 Name of Petitioner (in original case) (B) Case Number \_\_\_\_\_ (C)

AND

**PETITION TO MODIFY A CHILD  
 SUPPORT ORDER  
 (Standard Process)**

\_\_\_\_\_  
 Name of Respondent (in original case) (B)

**1. INFORMATION ABOUT THE PETITIONER:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_  
 County of Residence: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Job Title: \_\_\_\_\_

**2. INFORMATION ABOUT THE RESPONDENT:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_  
 County of Residence: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Job Title: \_\_\_\_\_

**3. INFORMATION ABOUT THE CURRENT CHILD SUPPORT ORDER**

(The Order I want to CHANGE)

The Order was issued on: \_\_\_\_\_ (Month/Day/Year)

The Order was issued by: \_\_\_\_\_ (Name of Court)

Located in this County: \_\_\_\_\_

Name of Person ordered to pay: \_\_\_\_\_

Total Current Amount Ordered Paid: \$ \_\_\_\_\_ PER \_\_\_\_\_

The current total court-ordered support payment listed above consists of:

Child Support \$ \_\_\_\_\_ per \_\_\_\_\_

Spousal Maintenance/Support \$ \_\_\_\_\_ per \_\_\_\_\_

Other: \$ \_\_\_\_\_ per \_\_\_\_\_

Payments in Arrears: \$ \_\_\_\_\_ per \_\_\_\_\_

**4. INFORMATION ABOUT OTHER COURT CASES TO ENFORCE OR CHANGE THIS COURT ORDER INVOLVING THE PETITIONER AND THE RESPONDENT:**

- No other cases are pending in any Court for enforcement or modification of this Court Order.** (This must be a true statement for this Court to hear your request.)
- Neither party has previously filed to enforce or modify this Court Order.**

If either party has filed for enforcement or modification of this Court Order in the past, you must provide the information requested below. Use additional paper if necessary. Otherwise, check the box above to indicate there have been no prior filings for enforcement or modification.

Names of Parties: \_\_\_\_\_

Date of Order, Judgment, Decree: \_\_\_\_\_

Explain what Order or Judgment said: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Location of Court (city and county): \_\_\_\_\_

List type of case: (modification or enforcement of custody, parenting time or support, emergency custody, etc.). Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**There must be a substantial and continuing change in circumstances before you can ask the Court to change the current child support order.**

**5. DEPARTMENT OF ECONOMIC SECURITY (DES).** Is the division of child Support Enforcement (DCSE) providing Child Support Services to at least one of the parties?

- Yes** (If yes, see instructions.)
- No**
- Unknown**

Case No: \_\_\_\_\_

6. **I AM ENTITLED TO HAVE CHILD SUPPORT CHANGED FOR THE FOLLOWING REASONS:** (Describe the substantial and continuing change in your circumstances and reasons for the change of child support.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. **For the substantial and continuing reasons listed in “6” above, the amount of the child support obligation should be changed to:**

Payments of \$ \_\_\_\_\_ PER \_\_\_\_\_.

**OATH OR AFFIRMATION**

**STATE OF ARIZONA            )**  
**County of Mohave            ) ss.**

I declare under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief under penalty of perjury.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Sworn to or affirmed before me this date of \_\_\_\_\_

By \_\_\_\_\_

\_\_\_\_\_  
My Commission Expires

\_\_\_\_\_  
Deputy Clerk or Notary Public