

Name of Person Filing: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Day/Evening Phone Number: _____
 ATLAS Number (if applicable) _____
 Attorney Bar Number (if Applicable) _____
 Representing: Self, Without a Lawyer OR
 Attorney for: Petitioner Respondent

**SUPERIOR COURT OF ARIZONA
 MOHAVE COUNTY**

Regarding the Matter of: _____

 (Name of Petitioner)

AND _____

 (Name of Respondent)

Case Number: _____

PETITION FOR PATERNITY
 (Check one box only)

- CHILD CUSTODY, PARENTING TIME, and CHILD SUPPORT**
- CHILD CUSTODY, PARENTING TIME ONLY**

GENERAL INFORMATION:

1. INFORMATION ABOUT THE PETITIONER

Name: _____
 Address: _____
 County of residence: _____
 Date of Birth: _____
 Occupation: _____
 Relationship to minor child(ren) for whom I want the paternity order:

- Mother
- I claim to be the Father
- I am a court-appointed guardian, conservator or "best friend" for the minor child(ren) born out of wedlock

2. INFORMATION ABOUT THE RESPONDENT

Name: _____
 Address: _____
 County of residence: _____
 Date of Birth: _____
 Occupation: _____
 Relationship to minor child(ren) for whom I want the CUSTODY/PARENTING TIME ORDER:

- Mother
- Father
- Other: (explain) _____

3. JURISDICTION: WHY I AM FILING THIS COURT CASE IN ARIZONA AGAINST THE OTHER PERSON: (check all that apply)

- The person is a resident of Arizona
- I believe that I will personally serve the person in Arizona (see packet on service to know about this)
- The person agrees to have the case heard here and will file written papers in the court case;
- The person lived with the minor child(ren) in this state at some time;
- The person lived in this state and provided pre-birth expenses or support for the minor child(ren);
- The minor child(ren) live/lives in this state as a result of the acts or directions of the person;
- The person had sexual intercourse in this state as a result of which the minor child(ren) may have been conceived;
- The person signed a birth certificate that is filed in this state;
- The person did any other acts that substantially connect the person with this state (see a lawyer to help you determine this).

4. INFORMATION ABOUT MINOR CHILD(REN) FOR WHOM I WANT PATERNITY ORDER:

Name: _____	Name: _____
Birthdate: (month/day/year) _____	Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____	City, State, Nation of Birth: _____

Name: _____	Name: _____
Birthdate: (month/day/year) _____	Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____	City, State, Nation of Birth: _____

Name: _____	Name: _____
Birthdate: (month/day/year) _____	Birthdate: (month/day/year) _____
City, State, Nation of Birth: _____	City, State, Nation of Birth: _____

STATEMENTS ABOUT PATERNITY:

5. WHY YOU THINK THE PERSON IS THE FATHER OF THE MINOR CHILD(REN): (check which box applies).

- AFFIDAVIT:** Petitioner and Respondent signed an Affidavit of Paternity acknowledging that
 - Petitioner or Respondent is the minor child(ren)'s natural father. A copy is attached.
- BIRTH CERTIFICATE:**
 - Petitioner or Respondent is named as the natural father on each of the minor child(ren)'s birth certificate(s). Copy (or copies) attached.
- BLOOD TEST:** DNA Testing indicates:
 - Petitioner or Respondent is the minor child(ren)'s natural father. Report(s) of test results attached.
- PARTIES LIVING TOGETHER:** Petitioner and Respondent were not married to each other at any time during the ten months before birth of the minor child(ren). However, the parties lived together during the period(s) when the minor child(ren) could have been conceived.

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

OTHER: (explain) _____

6. ABOUT MARRIAGE AND HUSBAND (if applicable, check one box.)

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

OTHER INFORMATION ABOUT THE MINOR CHILD(REN):

7. WHERE THE CHILD(REN) WHO IS/ARE UNDER 18 YEARS OLD HAS/HAVE LIVED FOR THE LAST 5 YEARS. (Attach extra pages if necessary.)

Child's Name _____	Dates: From _____ To _____
Lived with _____	Relationship to child: _____
Street address _____	City, State: _____

Child's Name _____	Dates: From _____ To _____
Lived with _____	Relationship to child: _____
Street address _____	City, State: _____

Child's Name _____	Dates: From _____ To _____
Lived with _____	Relationship to child: _____
Street address _____	City, State: _____

8. COURT CASES NOT INVOLVING CUSTODY OR PARENTING TIME RELATED TO THE CHILD(REN) UNDER 18 YEARS OLD: (check one box)

I have or I have not been a party or a witness in court in this state **or** any other state regarding issues OTHER THAN the custody or parenting time of any minor child(ren) named above (If so, explain below, using extra pages if necessary. **IF NOT, GO ON.**)

Name of each child: _____
 Court state: _____ Court location _____
 Court case number _____ Current status _____
 How the child(ren) is (are) involved: _____

Summary of any Court Order: _____

9. CUSTODY OR PARENTING TIME CASES RELATED TO CHILDREN UNDER 18 YEARS OLD:

(check one box)

I DO NOT HAVE **I DO HAVE** information about a custody or parenting time court case relating to any of the minor children named above that is pending in this state or in any other state (If so, explain below, using extra pages if necessary. IF NOT, GO ON).

Name of each child: _____

Court state: _____ Court location _____

Court case number _____ Current status _____

Nature of the Court proceeding: _____

Summary of any Court Order: _____

10. CUSTODY OR VISITATION CLAIMS OF ANY PERSON:

(check one box)

I DO NOT KNOW **I DO KNOW** a person other than the Petitioner or the Respondent who has physical custody or who claims custody or parenting time rights to any of the minor children named above. (If so, explain below, using extra pages if necessary. IF NOT, GO ON).

Name of each child: _____

Name of person with the claim: _____

Address of person with the claim: _____

Nature of the claim: _____

11. CUSTODY OF THE MINOR CHILD(REN): (If applicable, court must make findings in contested custody cases.)

- Sole Custody to Petitioner or Respondent or
 Joint Custody is in the best interests of the minor child(ren) for the following reasons: _____

OTHER STATEMENTS TO THE COURT:

12. MEDICAL EXPENSES: There are OR There are no 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 or Respondent according to law.

13. 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.

14. DOMESTIC VIOLENCE: (check if you are asking for joint custody.)

- Domestic violence has **not** occurred between the parties.
 Domestic Violence has occurred but it has not been significant. Explain why joint custody is still in the best interest of the minor child(ren) even though domestic violence has occurred.

15. VENUE: (Check here if the following statement is true):

- 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 minor child(ren).

16. DRUG CONVICTION WITHIN LAST TWELVE MONTHS: (Check one box.)

- I have not been convicted for a drug offense or driving under the influence of drugs or alcohol in the last twelve (12) months, OR

- I have been convicted for a drug offense or driving under the influence of drugs or alcohol in the last twelve (12) months. However, the parenting time arrangement I am requesting appropriately protects the minor child(ren). Explain how this arrangement appropriately protects the minor children. _____
-
-

REQUESTS I MAKE TO THE COURT:

17. **PATERNITY:** Order that _____ (legal name of the father, as on his birth certificate) be declared the natural father of the minor child(ren).

18. **BIRTH CERTIFICATE:**

Order that the name of the father _____ be added to each minor child's birth certificate;
(father's name)

19. **CHILD(REN) LAST NAME:** (check the box and fill in the blank if you want this):

- Order that each minor child's last name be changed to the last name of _____;

20. **CUSTODY OF MINOR CHILD(REN) AND PARENTING TIME:** (check and complete 1 or 2);

A. SOLE CUSTODY:

- Sole custody of the minor child(ren) awarded to Petitioner **or** Respondent subject to Parenting Time as follows:

1.) Reasonable Parenting Time rights to the parent not having custody, as will be described in a Parenting Plan attached to the Final Order, OR

2.) Supervised parenting time between the minor child(ren) and Petitioner or Respondent is in the best interests of the minor child(ren) for the following reasons: (explain here reasons for supervision or no parenting time): _____

i. Supervised parent/child access to the parent not having custody, only in the presence of another person, who is named by the court (suggestion below) upon a finding that supervised access is in the best interest of the minor child(ren),

• Person to supervise: _____

• Requested restrictions on Parenting Time: (explain here)

• The cost of supervised parenting time shall be paid by the parent being supervised; the parent having custody; shared equally by the parties.

OR

ii. No parenting time rights to the parent not having custody.

OR

B. JOINT CUSTODY:

- Petitioner and Respondent agree to act as joint custodians of the minor child(ren), as set forth in the Parenting Plan by the parties, signed by both parties, if the court adopts the agreed terms of

the joint custody agreement setting forth the custody and parenting time agreement between the parties. There have been no significant acts of domestic violence by either parent.

21. **CHILD SUPPORT: Order** that child support shall be paid by: **(check one box)**
 Petitioner **or** Respondent in a reasonable amount as determined by the court under the Arizona Child Support Guidelines. Support payments shall begin on the first day of the first month following the entry of the Paternity Decree/Order. These payments, plus a statutory fee for handling, shall be paid through the Support Payment Clearinghouse and collected by automatic wage assignment. Further, that costs for past child support and care for child(ren) in the amount of \$_____ shall be paid by Petitioner or Respondent in the amount of \$_____ each month until paid in full. Payments shall be made as stated above.

22. **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 each child(ren).

23. **HEALTH, MEDICAL, DENTAL, VISION CARE INSURANCE AND HEALTH CARE EXPENSES FOR CHILDREN UNDER THE AGE OF 18:**

- | | | | |
|--------------------------|-----------------------------------|--------------------------|-----------------------------------|
| <input type="checkbox"/> | Petitioner should provide: | <input type="checkbox"/> | Respondent should provide: |
| <input type="checkbox"/> | medical | <input type="checkbox"/> | medical |
| <input type="checkbox"/> | dental | <input type="checkbox"/> | dental |
| <input type="checkbox"/> | vision care insurance | <input type="checkbox"/> | vision care insurance |

Order that Petitioner and Respondent pay for all reasonable unreimbursed medical, dental, vision care, and health-related expenses incurred for the minor child(ren) in proportion to their respective incomes as described on the Parents' Worksheet, which shall be submitted with the Judgment and Order.

24. **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 necessary by this Court to establish paternity, and that Respondent must pay all costs and expenses of this lawsuit, if he/she contests these proceedings, including the costs of the blood tests or other genetic testing; filing each child's birth certificate; attorneys' fees and court costs;

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

OATH OR AFFIRMATION

STATE OF ARIZONA)
) ss.
County of Mohave)

I declare under penalty of perjury that the information I have provided is true and correct to the best of my knowledge and belief.

SIGNATURE: _____ **DATE:** _____

Sworn to or affirmed before me this _____ day of _____

by _____.

My Commission Expires: _____

Notary Public / Deputy Clerk