

Name of Person Filing Document: _____
 Your Address: _____
 Your City, State, and Zip Code: _____
 Your Telephone Number: _____
 Atlas Number (if applicable): _____
 Attorney Bar Number (if applicable): _____
 Representing Self (Without Attorney) OR
 Attorney for Petitioner OR Respondent

For Clerk's Use Only

**SUPERIOR COURT OF ARIZONA
 MARICOPA COUNTY**

 Name of Petitioner

Case Number: _____

and

**AFFIDAVIT REGARDING
 MINOR CHILDREN**

 Name of Respondent

NOTICE: This "Affidavit Regarding Minor Children" is required for all custody cases. You must fill out this Affidavit completely, and provide accurate information. Use additional paper if necessary. You must give copies of this Affidavit and all other required documents to the other party, and to the judge.

1. CHILDREN OF THE PARTIES WHO ARE UNDER 18 YEARS OLD. The following child(ren) are under age 18 and were born to, or adopted by, me and the other party.

Name _____	Name _____
Birthdate: _____ Age: _____	Birthdate: _____ Age: _____
Name _____	Name _____
Birthdate: _____ Age: _____	Birthdate: _____ Age: _____

2. INFORMATION REGARDING WHERE THE CHILDREN UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS.

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

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

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

3. COURT CASES IN WHICH I HAVE BEEN A PARTY/WITNESS THAT INVOLVED THE CUSTODY PARENTING TIME OF THE CHILD(REN). (Check one box.)

I have or I have **not** been a party/witness in court in this state or in any other state that involved the custody parenting time of the child(ren) named above. (If so, explain on separate paper,. If not, go on.)

Case No. _____

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

4. INFORMATION REGARDING PENDING COURT CASES RELATED TO THE CUSTODY OF THE CHILD(REN). (Check one box.)

I do have or I do not have information about a custody parenting time court case relating to any of the children named above that is pending in this state or in any other state. (If so, explain. If not, go on.)

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

5. CUSTODY OR PARENTING TIME CLAIMS OF ANY PERSON. (Check one box.)

I do know or I do not 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 children named in this Affidavit. (If so, explain below. If not, go on.)

Name of each child: _____
Name of person with the claim: _____
Address of person with the claim: _____
Nature of the claim: _____

OATH OR AFFIRMATION AND VERIFICATION

I swear or affirm that the information on this document is true and correct under penalty of perjury.

Signature Date

Sworn to or Affirmed before me this: _____ by _____
(date)

My Commission Expires: _____
Deputy Clerk or Notary Public