

Name of Person Filing: _____
 Street Address: _____
 City, State, Zip Code: _____
 Telephone Number: _____
 Email Address: _____
 ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
 If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
 PINAL COUNTY**

_____ CASE NUMBER: DO2
 Name of Petitioner

**AFFIDAVIT REGARDING
 MINOR CHILDREN**

_____ HONORABLE: _____
 Name of Respondent

NOTICE: This "Affidavit Regarding Minor Children" is required for all legal decision-making 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: _____
Birth Date: _____ Age: _____	Birth Date: _____ Age: _____
Name: _____	Name: _____
Birth Date: _____ Age: _____	Birth Date: _____ Age: _____

2. INFORMATION REGARDING WHERE THE CHILDREN UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS: (Attach additional pages if necessary)

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: _____

