LAW LIBRARY AND RESOURCE CENTER

Information and Instructions for Completing the "Resolution Statement" for Paternity and Legal Decision-Making Cases

GENERAL INFORMATION

Arizona Rule of Family Law Procedure 49 (Rule 49) requires both parties to share information in family law cases. It requires each party send to the other party a detailed statement with the specific positions the party proposes to resolve all issues. It also requires parties to exchange detailed facts and documents concerning issues of child support, legal decision-making, parenting time, spousal maintenance, witnesses, attorney fees, property, and debt.

Rule 49 allows full discovery of important facts to avoid "litigation by ambush." The Rule promotes greater professionalism among counsel, with the ultimate goal of increasing voluntary cooperation and exchange of information. The Rule is also meant to help the parties focus on the problems that are truly in dispute by resolving (by the free exchange of information) issues where they unexpectedly agree. Disclosure rules also encourage the trial courts to deal with discovery abuse in a strong and forthright fashion. Ultimately, obedience to the discovery rules enables a more efficient, less expensive, and more accessible Arizona judicial system.

RESOLUTION STATEMENT

- 1. What is a "Resolution Statement?" A Resolution Statement is a detailed description of the position a party proposes to resolve all the issues in a Family Law case. The Resolution Statement is one part of the fact sharing process required by Rule 49 of the Arizona Rules of Family Law Procedure.
- 2. When do I file the "Resolution Statement?" You file the Resolution Statement 30 days after exchanging with the other party your initial disclosure information, or as ordered by the Court.
- 3. Where do I file the "Resolution Statement?" You file the Resolution Statement with the Clerk of Superior Court, Civil Unit on the 1st floor of Superior Court.
- 4. Who must file a "Resolution Statement?" Every party involved in a divorce, or any non-divorce case involving paternity, legal decision-making, parenting time or child support must file a resolution statement, unless the court permits otherwise.
- 5. Do I have to provide the "Resolution Statement" on the other party? Yes. A Resolution Statement must be provided to all parties, or their attorneys. In addition to filing the original statement with the Clerk of Superior Court, a party must provide a file-stamped copy to the assigned judge and provide (either First-Class mail or hand-deliver) a copy on all other parties or their attorneys. You do not need to mail the Resolution statement by means that require a signed receipt.
- 6. What is the difference between a "Resolution Statement" and a "Disclosure Statement?" The Resolution Statement requests different information than the Disclosure Statement. Also, the Resolution Statement *is filed* with the Clerk of Superior Court, whereas the Disclosure Statement is *not filed* with the Clerk of Superior Court.

INSTRUCTIONS

How to fill out the "Resolution Statement" in a paternity or legal decision-making case.

HEADING:

- 1. In the top left corner of the first page, fill out the following: YOUR name; address (if not protected); city, state and zip code; telephone number; and your ATLAS number, if you are receiving or have received AFDC from the Arizona Department of Economic Security.
- 2. Fill in the space that says "Petitioner" and "Respondent"

• ITEM NUMBERS:

- Item 1: IV-D Case: Place a check mark in the box or boxes that best describe(s) your situation regarding the listed forms of public assistance, or the state Division of Child Support Enforcement.
- Item 2: Legal Decision-Making (legal custody): List the names, birthdates, and ages of minor children in common with your spouse. Then check the appropriate boxes and fill in the blanks describing how you want to manage the Legal Decision-Making (legal custody).
- Item 3: Child Support: If there are no minor or disabled children common to the parties and if there were no minor or disabled children from the date the parties separated, skip to Item number 5. Otherwise, on the space provided state your monthly income and that of your spouse. Then check the appropriate boxes regarding your position on the financial factors necessary to calculate child support.

Past Support: check the appropriate boxes and then complete the sentence regarding your position concerning past support.

Direct Payments: Enter the amount of direct payments that have already been made. Include the time period during which those payments were made.

Past Medical Expenses: Enter the total amount of medical expenses that you have incurred and the time period during which you incurred them. Also enter the percent of those expenses for which you think the other parent is responsible.

Pregnancy, Childbirth, and/or Genetic Testing: Enter the total amount of the expenses you have incurred due to pregnancy, childbirth, and/or genetic testing. Also enter the percent of those expenses for which you think the other parent is responsible.

- Item 4: Attorneys' Fees: You may ask that each party be responsible for his or her own attorneys' fees and other costs, or you may request that each party pay a specific amount of the total attorneys' fees and costs incurred by both parties.
- Item 5: Name Change: If you are requesting that the child(ren)'s names be changed, write the child(ren)'s current names and what you request they be changed to.
- Item 6: Other Issues: State any other issues that you believe must be resolved to fully settle this case.

LAW LIBRARY AND RESOURCE CENTER

Item 7: Settlement: By signing this document, you verify that what you have stated in it is true to the best of your knowledge and that you will be prepared to support what you have stated with documentation at the time of your hearing. You also verify that you will settle the case if the terms you state above are met.

PROCEDURES

What to do after filling out the "Resolution Statement."

- 1. Fill out the "Resolution Statement" and sign it.
- 2. Make 3 copies.
- 3. File the original and 3 copies with the Clerk of Superior Court. The Clerk will keep the original and give you back 2 copies.
- 4. Mail and/or hand-deliver a copy to Judge assigned to your case and the opposing party or his/her attorney. If you choose to mail a copy, you just need to mail it by First-Class mail. You do not need to mail the Resolution Statement by means that requires a signed receipt. Keep a copy of the statement for your records.

LAW LIBRARY AND RESOURCE CENTER

Person Filing:	<u> </u>	
Telephone:Email Address:	EOR OLER	K'S USE ONLY
ATLAS Number:		
Representing Self, without a Lawyer or Attorney for Petiti	ioner OR Respondent	
ARIZONA SUPERIOR CO PIMA COUNTY	URT IN	
Petitioner ATLAS No.	o	
DECISION STATEM	SED PATERNITY ON-MAKING RESOLUT MENT OF: titioner spondent	
I, the person signing this document (or his or her attorney), be resolved as follows: (BE SPECIFIC.)	elieve the issues in this o	case should
 IV-D Case: I receive or have received public assistance that may in my children or me. I have a case with the Division of Child Support Enforcement Not applicable. 		AHCCCS for
2. Legal Decision-Making (legal custody) and Parenting Time following natural or adopted children in common:	e: The other parent and I h	nave the
Child(ren)'s Name(s)	Date of Birth	Age

_	
	In accordance with Pima County Guidelines for reasonable parenting time.
	Every other weekend from:
	ata.m./p.m. to
	ata.m./p.m.
	One-half of the holidays on an alternating basis.
	Forweeks in the summer fromto(inclusive
	Spring Break from school.
	Other:
	Petitioner or Respondent or both parties should make decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under the Child Support Ch
Arizo	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under a Child Support Guidelines is as follows (complete in full):
Arizo Petiti	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support und the child Support Guidelines is as follows (complete in full): Oner's Gross Monthly Income: \$
Arizo Petiti	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under a Child Support Guidelines is as follows (complete in full):
Arizo Petiti	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support und the child Support Guidelines is as follows (complete in full): Oner's Gross Monthly Income: \$
Arizo Petiti	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under the child Support Guidelines is as follows (complete in full): oner's Gross Monthly Income: \$
Arizo Petiti Resp	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under the child Support Guidelines is as follows (complete in full): oner's Gross Monthly Income: \$
Arizo Petiti Resp	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under the child Support Guidelines is as follows (complete in full): oner's Gross Monthly Income: \$
Arizo Petiti Resp	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under the child Support Guidelines is as follows (complete in full): oner's Gross Monthly Income: pondent's Gross Monthly Income: Petitioner hasother child(ren) not listed above who live(s) in his/her housel Petitioner hasother child(ren) not listed above for whom he/she pays court ordered child support in the amount of \$per month.
Arizo Petiti Resp	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support under a Child Support Guidelines is as follows (complete in full): oner's Gross Monthly Income: pondent's Gross Monthly Income: Petitioner has other child(ren) not listed above who live(s) in his/her housel Petitioner has other child(ren) not listed above for whom he/she pays court ordered child support in the amount of \$ per month. Respondent has other child(ren) not listed above who live(s) in her/his housel Respondent has other child(ren) not listed above for whom she/he pays court
Arizo Petiti Resp	decisions about the child(ren), such as schools, doctors, etc. Support: My position on the financial factors necessary to calculate child support und real child Support Guidelines is as follows (complete in full): oner's Gross Monthly Income: \$

Case No.

	Vision Care Insurance should be paid by Petitioner Respondent. The monthly cost for the child(ren) in this case is \$					
	Neither parent has insurance which is accessible and available at a reasonable cost. Petitioner Respondent should pay cash medical support in the amount of per month.					
	Monthly Child Care Costs for child(ren) is \$					
	Extra Education Expenses or Extraordinary Child Adjustments: I believe the Court should add the following to the child support calculation (leave blank if none claimed):					
-	Description Monthly Amount					
_	Uninsured Medical Expenses should be paid: Pro rata based upon each party's income as provided in the guidelines; or					
	Other:% paid by Petitioner and% paid by					
	Respondent.					
	Tax Exemptions for the child[ren] should be divided (check one):					
	☐ Pro rata based upon each party's income as provided in the guidelines; or☐ Other:					
	Past Support should be paid by Petitioner Respondent for the period of					
	through in the amount of					
	\$					
	Direct payments for support have been $\ \ \ \ \ \ \ \ \ \ \ \ \ $					
	period ofthrough					
	in the amount of \$					
	Past Medical Expenses have been incurred by me (and not reimbursed by insurance) for					
	the period ofthrough					
	in the amount of \$and the other parent should be ordered to					
	reimburse me for % of those expenses.					

Case No. _____

		Expenses for pregnancy, childbirth, and genetic testing have been incurred by me (and
		not reimbursed by insurance) in the amount of \$and the other
		parent should be ordered to reimburse me for% of those expenses.
4.	<u>Attorr</u>	neys' Fees: If the case is settled today, I request the Court to order (choose one):
		Each party to pay his or her own attorneys' fees and costs.
		Petioner to pay \$of my attorneys' fees and costs withindays.
		Respondent to pay \$to other party for attorneys' fees and costs withindays.
5.	Name	e Change: I want the child(ren)'s names to be changed as follows:
6.	Other	r Issues: Briefly state the other issues that you believe must be resolved to fully settle this
	_	
7.	and t possi violer	ement: I understand that I am required to personally meet and confer with the opposing party their counsel at least five court days before my court date to resolve as many issues as able unless there is a current court order prohibiting contact or a significant history of domestic note between us. I verify that the above statements are true based on my best information belief, and I am willing to settle and resolve this case based upon my positions as provided
		e. I will be prepared to show documentation to support my positions at the time of the erence or hearing.
Date		Signature of Petitioner Respondent
		☐ Attorney for ☐Petitioner ☐ Respondent

Case No.

Case No.		
ase NO.		

This page must be completed and attached to the LAST page of your Document

	I filed the Pima Cou		attached doc	ument(s) with the Clerk of Superior Court in		
	Month	Date	Year			
		elivered (circle o		of the attached document(s) to the Judicial Officer assigned to my		
		-		(Judicial Officer assigned to your case)		
	Month	Date	Year			
		elivered (circle c of Arizona) on th		of the attached document(s) to the Office of the Attorney General licable):		
	Month	Date	Year	Address		
	I mailed/d Attorney o	•	o ne) a COPY o	of the attached document(s) to the Opposing Party and/or his/her		
П		24.0	. 54.			
Ш	Name of Other Side			Name of Other Side's Lawyer		
	Address			Lawyer's Address		
	City, State,	Zip		City, State, Zip		
	(You must	mail or hand de	eliver a copy	of all documents to the other side and his/her lawyer)		
By sig	gning below	•	•	penalty of law, that the information stated on these pages is he best of my knowledge and belief.		
				ached document(s) as shown above. I understand that if I do own above, the Judge in my case will not read the attached document.		
Your	Signature					