

CLERK OF THE COURT
SUPERIOR COURT OF ARIZONA

MARICOPA COUNTY
201 West Jefferson
Phoenix, Arizona 85003

\$67.00 FEE

ARREARAGE CALCULATION REQUEST

DATE: _____

CASE NUMBER: _____ ATLAS NUMBER: _____

CASE NAME:

_____ VS. _____

CHILDREN:

FULL NAME: _____ D.O.B. ___/___/___ GRADUATION DATE: ___/___

FULL NAME: _____ D.O.B. ___/___/___ GRADUATED DATE: ___/___

FULL NAME: _____ D.O.B. ___/___/___ GRADUATED DATE: ___/___

FULL NAME: _____ D.O.B. ___/___/___ GRADUATED DATE: ___/___

REQUESTED BY:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) _____

FOR OFFICE USE ONLY

Date Payment History Requested: _____ Date Legal File Requested: _____

Date Legal File Received: _____ Date Arrears Calc Started: _____

Date Arrears Calc Reviewed: _____ Date Arrears Calc Mailed: _____

COMMENTS:

