

Person Filing: \_\_\_\_\_

Address (if not protected): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

ATLAS Number: \_\_\_\_\_

Lawyer's Bar Number: \_\_\_\_\_

Representing  Self, without a Lawyer OR  Attorney for  Petitioner OR  Respondent

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA  
IN \_\_\_\_\_ COUNTY

\_\_\_\_\_  
Name of Petitioner / Party A

Case No: \_\_\_\_\_

\_\_\_\_\_  
Name of Respondent / Party B

FAMILY DEPARTMENT  
ACCEPTANCE OF SERVICE  
A.R.F.L.P. Rule 40(F)

Check the box to show each document you received. Do not check the box unless you received the document listed beside it. If your case is not one of the types listed, list the type of case and the documents you received from the other party under "other case type."

1. By signing this document, I state under oath or affirmation that I have received and accepted the legal papers indicated (checked) below:

DIVORCE WITH CHILDREN	LEGAL SEPARATION WITH CHILDREN	TEMPORARY ORDERS
<input type="checkbox"/> Petition	<input type="checkbox"/> Petition	<input type="checkbox"/> Motion for Temporary Orders
<input type="checkbox"/> Summons	<input type="checkbox"/> Summons	<input type="checkbox"/> Order to Appear
<input type="checkbox"/> Preliminary Injunction	<input type="checkbox"/> Preliminary Injunction	<input type="checkbox"/> Affidavit of Financial Information <i>(if for spousal maintenance or child support)</i>
<input type="checkbox"/> Parenting Plan	<input type="checkbox"/> Parenting Plan	<input type="checkbox"/> Affidavit of Financial Information <i>(blank one for other party)</i>
<input type="checkbox"/> Child Support Worksheet	<input type="checkbox"/> Child Support Worksheet	<input type="checkbox"/> Child Support Worksheet <i>(if for child support)</i>
<input type="checkbox"/> Notice of your Rights about Health Insurance Coverage	<input type="checkbox"/> Notice Regarding Creditors	<input type="checkbox"/> Parenting Plan <i>(if for legal decision-making/parenting time)</i>
<input type="checkbox"/> Notice Regarding Creditors	<input type="checkbox"/> Order and Notice to Attend Parent Information Class	
<input type="checkbox"/> Order and Notice to Attend Parent Information Class	<input type="checkbox"/> Affidavit Regarding Minor Children	
<input type="checkbox"/> Affidavit Regarding Minor Children		

<p><b>DIVORCE (OR ANNULMENT) WITHOUT CHILDREN</b></p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Summons</p> <p><input type="checkbox"/> Preliminary Injunction</p> <p><input type="checkbox"/> Notice of your Rights about Health Insurance Coverage</p> <p><input type="checkbox"/> Notice Regarding Creditors</p>	<p><b>LEGAL SEPARATION WITHOUT CHILDREN</b></p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Summons</p> <p><input type="checkbox"/> Preliminary Injunction</p> <p><input type="checkbox"/> Notice Regarding Creditors</p>	<p><b>ESTABLISH LEGAL DECISION-MAKING, PARENTING TIME, AND CHILD SUPPORT</b></p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Summons</p> <p><input type="checkbox"/> Preliminary Injunction</p> <p><input type="checkbox"/> Child Support Worksheet</p> <p><input type="checkbox"/> Parenting Plan</p> <p><input type="checkbox"/> Order and Notice to Attend Parent Information Class</p>
<p><b>ESTABLISH CHILD SUPPORT</b></p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Child Support Worksheet</p> <p><input type="checkbox"/> Order to Appear</p>	<p><b>PATERNITY OF AN ADULT CHILD</b></p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Summons</p>	<p><b>ESTABLISH PATERNITY, LEGAL DECISION MAKING, PARENTING TIME, AND CHILD SUPPORT</b></p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Summons</p> <p><input type="checkbox"/> Preliminary Injunction</p> <p><input type="checkbox"/> Child Support Worksheet</p> <p><input type="checkbox"/> Parenting Plan</p> <p><input type="checkbox"/> Order and Notice to Attend Parent Information Class</p>
<p><b>MODIFY SPOUSAL MAINTENANCE OR SPOUSAL MAINTENANCE AND CHILD SUPPORT</b></p> <p><input type="checkbox"/> Petition to Modify Support</p> <p><input type="checkbox"/> Affidavit of Financial Information (of filing party)</p> <p><input type="checkbox"/> Affidavit of Financial Information (<i>blank one for other party</i>)</p> <p><input type="checkbox"/> Order to Appear</p>	<p><b>MODIFY CHILD SUPPORT ("Simplified Mod")</b></p> <p><input type="checkbox"/> Petition to Modify</p> <p><input type="checkbox"/> Child Support Worksheet</p>	<p><b>MODIFY CHILD SUPPORT ("Standard Mod")</b></p> <p><input type="checkbox"/> Petition to Modify</p> <p><input type="checkbox"/> Child Support Worksheet (<i>from order you wish to change</i>)</p> <p><input type="checkbox"/> Affidavit of Financial Information (of filing party)</p> <p><input type="checkbox"/> Affidavit of Financial Information (<i>blank one for other party</i>)</p> <p><input type="checkbox"/> Order to Appear</p>

<p><b>MODIFY PARENTING TIME</b> (Or Parenting Time and Child Support)</p> <input type="checkbox"/> Petition to Modify <input type="checkbox"/> Parenting Plan <input type="checkbox"/> Order to Appear <input type="checkbox"/> Child Support Worksheet <input type="checkbox"/> Affidavit of Financial Information <input type="checkbox"/> Affidavit Regarding Minor Children <i>(only if children have lived outside state at some time in last 5 years)</i>	<p><b>MODIFY LEGAL DECISION-MAKING, PARENTING TIME AND CHILD SUPPORT</b></p> <input type="checkbox"/> Petition to Modify <input type="checkbox"/> Parenting Plan <input type="checkbox"/> Child Support Worksheet <i>(if for child support)</i> <input type="checkbox"/> Affidavit Regarding Minor Children <i>(only if children have lived outside state at some time in last 5 years)</i> <input type="checkbox"/> Order to Appear <input type="checkbox"/> Order Stopping Income Withholding Order <i>(if applicable)</i>	<p><b>MODIFY INCOME WITHHOLDING ORDER</b></p> <input type="checkbox"/> Petition to Modify
<p><b>STOP INCOME WITHHOLDING ORDER</b></p> <input type="checkbox"/> Petition to Stop	<p><b>PRE-DECREE MEDIATION</b></p> <input type="checkbox"/> Request for Pre-Decree Mediation	<p><b>POST-DECREE MEDIATION</b></p> <input type="checkbox"/> Request for Post-Decree Mediation <input type="checkbox"/> Order to Appear

List other case type here: (Example: "Annulment") \_\_\_\_\_

(Below, list name of each document you received: Example: "Petition for Annulment," "Summons," etc.)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. Accept Service. I understand accepting these papers is the same as if I were personally served under Arizona Law [A.R.F.L.P. Rule 40 (F)].
  
2. Response Deadline. I am aware that accepting service of these court papers and signing this paper does not affect my right or obligation to file a written Response or Answer to this action if I do not agree with any relief asked for in the Petition. I understand I must Respond or Answer within 20 days from the day that this Acceptance of Service is filed with the Clerk of Superior Court if I accepted service in Arizona, or 30 days if I received the papers somewhere other than in Arizona.
  
3. Default Judgment, Order or Decree. I understand that if I do not appear and defend in this action in court, within the time allowed by law, that I may lose my right to be heard in this case. I understand that failure to Respond or Answer could result in the court giving the other party any and all things requested in his or her legal papers, through a Default Judgment, Order or Decree.
  
4. Restore name (only in Divorce Cases).

My complete married name is: (Optional. Complete only if you want to change your name)

\_\_\_\_\_

I want my legal name restored to: (List complete maiden name or legal name before this marriage)

\_\_\_\_\_

\_\_\_\_\_

Not applicable

By signing below, I swear or affirm that I have read and understand the contents of this document and that I have received and accepted the legal documents indicated above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Person Who Signed

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to or affirmed before me this: \_\_\_\_\_ by  
(date)

\_\_\_\_\_.

(Notarial Officer's Stamp or Seal)

\_\_\_\_\_  
Notarial Officer