

State of Arizona  
COMMISSION ON JUDICIAL CONDUCT

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Disposition of Complaint 23-227

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Judge:

Complainant:

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**ORDER**

October 6, 2023

The Complainant alleged erroneous legal rulings by a superior court judge hearing a family case.

The role of the Commission on Judicial Conduct is to impartially determine whether a judicial officer has engaged in conduct that violates the Arizona Code of Judicial Conduct or Article 6.1 of the Arizona Constitution. There must be clear and convincing evidence of such a violation in order for the Commission to take disciplinary action against a judicial officer.

The Commission does not have jurisdiction to overturn, amend, or remand a judicial officer's legal rulings. The Commission reviewed all relevant available information and concluded there was not clear and convincing evidence of ethical misconduct in this matter. The complaint is therefore dismissed pursuant to Commission Rules 16(a) and 23(a).

Commission members Barbara Brown, Colleen E. Concannon, and Louis Frank Dominguez did not participate in the consideration of this matter.

Copies of this order were distributed to all appropriate persons on October 6, 2023.

**CONFIDENTIAL**

Arizona Commission on Judicial Conduct  
1501 W. Washington Street, Suite 229  
Phoenix, Arizona 85007

**FOR OFFICE USE ONLY**

2023-227

**COMPLAINT AGAINST A JUDGE**

Name: \_\_\_\_\_ Judge's Name: \_\_\_\_\_

**Instructions:** Use this form or plain paper of the same size to file a complaint. Describe in your own words what you believe the judge did that constitutes judicial misconduct. Be specific and list all of the names, dates, times, and places that will help the commission understand your concerns. Additional pages may be attached along with copies (not originals) of relevant court documents. Please complete one side of the paper only, and keep a copy of the complaint for your records.

I CONSIDER THAT THIS JUDGE  
HAS MISCONDUCT OR HAS BEEN  
BRIBED FOR THE REASON THAT;  
THIS JUDGE HAS PUT ON  
ERRONEOUS INCOME FOR ME AND  
FOR THE FATHER OF MY SON AS WELL.  
JUDGE \_\_\_\_\_ HAS NEVER  
CONFIRMED MY TAXES OR THOSE OF  
MY SON'S FATHER. ~~AND~~



Date:

NO. \_\_\_\_\_

\_\_\_\_\_) )  
 Parent A / Petitioner )  
 and )  
 \_\_\_\_\_) )  
 Parent B / Respondent )

**Child Support Worksheet**  
 ( Guidelines)

DOB:					
Age:					
Youngest Grade Estimated:		Actual Grade:			
Presumptive Termination Date:					
Number of Minor Children: _____ Children or Over:					

Parenting Plan:

Parent A  Parent B  Equal

**Parent A**

**Parent B**

Child Support Income:

	Monthly	Annually	Hourly	Attributed
Parent A:				
Parent B:				

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Adjustments to Child Support Income: [Mandatory]

Court Ordered Spousal Maintenance (Paid) / Received:

\_\_\_\_\_

Court Ordered Child Support of Other Relationships (Actually Paid)

\_\_\_\_\_

Support of Child[ren] from Other Relationships:

Parent A's \_\_\_\_\_ Other Child Deduction Of:

\_\_\_\_\_

Parent B's \_\_\_\_\_ Other Child[ren] Deduction Of:

\_\_\_\_\_

Adjusted Child Support Income

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Combined Adjusted Child Support Income

\$ \_\_\_\_\_

Basic Combined Child Support Obligation For 1 Child:

\$ \_\_\_\_\_

Adjustments To Basic Combined Child Support Obligation:

Adjustment For \_\_\_\_\_ Child Age 12 and over at 10%

[Mandatory]

\_\_\_\_\_

Medical, Dental and Vision Insurance Paid By Parent A:

[Mandatory]

\_\_\_\_\_

Monthly Childcare Costs For \_\_\_\_\_ Child Paid By:

[Discretionary]

\_\_\_\_\_

Extra Education Expenses Paid By:

[Discretionary]

\_\_\_\_\_

Extraordinary (Gifted or Special Needs) Child Expenses Paid By:

[Discretionary]

\_\_\_\_\_

Total Child Support Obligation

\$ \_\_\_\_\_

Each Parent's Proportionate Percentage of Combined Adjusted Child Support Income

\_\_\_\_\_

Each Parent's Proportionate Share of Total Child Support Obligation

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Parenting Time Adjustment For Parent A Using \_\_\_\_\_

[Mandatory]

Using Parenting Time

For \_\_\_\_\_ Days At \_\_\_\_\_ %

0.00

Total Adjustments To Child Support Obligation From Above Paid By Each Parent

0.00

Presumptive Child Support Obligation

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Self-Support Reserve Test: Parent A's Adjusted Child Support Income:

\$ \_\_\_\_\_ [Discretionary]

Less Self Support Reserve Amount:

\$ \_\_\_\_\_

Self Support Reserve Test Not Applied (X):

Max. C.S.

Monthly Child Support amount to be paid by Parent A:

\$ \_\_\_\_\_

This Product Contains Sensitive Taxpayer Data

Request Date:  
Response Date:  
Tracking Number:

Record of Account

FORM NUMBER: TAX PERIOD:  
TAXPAYER IDENTIFICATION NUMBER: XXX-XX-

--- ANY MINUS SIGN SHOWN BELOW SIGNIFIES A CREDIT AMOUNT ---

ACCOUNT BALANCE:  
ACCRUED INTEREST: AS OF: Apr.  
ACCRUED PENALTY: AS OF: Apr.

ACCOUNT BALANCE  
PLUS ACCRUALS  
(this is not a  
payoff amount):

\*\* INFORMATION FROM THE RETURN OR AS ADJUSTED \*\*

EXEMPTIONS:  
FILING STATUS: Head of Household  
ADJUSTED GROSS  
INCOME:  
TAXABLE INCOME:  
TAX PER RETURN:  
SE TAXABLE INCOME  
TAXPAYER:  
SE TAXABLE INCOME  
SPOUSE:  
TOTAL SELF  
EMPLOYMENT TAX:

RETURN DUE DATE OR RETURN RECEIVED DATE (WHICHEVER IS LATER)  
PROCESSING DATE

		TRANSACTIONS		
CODE	EXPLANATION OF TRANSACTION	CYCLE	DATE	AMOUNT
150	Tax return filed			
806	W-2 or 1099 withholding			
768	Earned income credit			
846	Refund issued			

This Product Contains Sensitive Taxpayer Data

Request Date:  
Response Date:  
Tracking Number:

Record of Account

FORM NUMBER: TAX PERIOD:  
TAXPAYER IDENTIFICATION NUMBER: XXX-XX-

--- ANY MINUS SIGN SHOWN BELOW SIGNIFIES A CREDIT AMOUNT ---

ACCOUNT BALANCE:  
ACCRUED INTEREST: AS OF:  
ACCRUED PENALTY: AS OF:

ACCOUNT BALANCE  
PLUS ACCRUALS  
(this is not a  
payoff amount):

\*\* INFORMATION FROM THE RETURN OR AS ADJUSTED \*\*

EXEMPTIONS:  
FILING STATUS: Head of Household  
ADJUSTED GROSS  
INCOME:  
TAXABLE INCOME:  
TAX PER RETURN:  
SE TAXABLE INCOME  
TAXPAYER:  
SE TAXABLE INCOME  
SPOUSE:  
TOTAL SELF  
EMPLOYMENT TAX:

RETURN DUE DATE OR RETURN RECEIVED DATE (WHICHEVER IS LATER)  
PROCESSING DATE

		TRANSACTIONS		
CODE	EXPLANATION OF TRANSACTION	CYCLE	DATE	AMOUNT
150	Tax return filed			
806	W-2 or 1099 withholding			
766	Credit to your account			
768	Earned income credit			

**THE COMMISSION'S POLICY IS  
TO POST ONLY THE FIRST FIVE  
PAGES OF ANY DISMISSED  
COMPLAINT ON ITS WEBSITE.**

**FOR ACCESS TO THE  
REMAINDER OF THE  
COMPLAINT IN THIS MATTER,  
PLEASE MAKE YOUR REQUEST  
IN WRITING TO THE  
COMMISSION ON JUDICIAL  
CONDUCT AND REFERENCE  
THE COMMISSION CASE  
NUMBER IN YOUR REQUEST.**