IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF LANE

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	REQUEST FOR MEDIATION
	)	BY ONE PARENT and ORDER
_____,	)	
Respondent.	)	

I,_____, am the ☐ mother ☐ father of the child(ren) in this matter. We cannot agree upon custody or parenting time, and I am requesting we attend mediation through the Lane County Family Mediation Program. I am therefore filing this Request and Order for Mediation by One Parent. I have kept a copy. I have taken the responsibility to see that the other parent receives a copy of this request, as indicated in the "Notice" section below.

Signed:_____Date:_____
(Parent)

BOTH PARENTS MUST PROMPTLY CONTACT THE LANE COUNTY FAMILY MEDIATION PROGRAM, (541) 682-3962, 151 W. 7th AVENUE, SUITE 360, EUGENE, OR 97401, TO SCHEDULE A MEDIATION APPOINTMENT. YOU MUST CONTACT THE PROGRAM WITHIN SEVEN (7) DAYS OF THE DATE THIS FORM WAS MAILED OR GIVEN TO THE OTHER PARENT.

IT IS SO ORDERED: _____DATE_____
Circuit Court Judge

NOTICE TO PARENTS MAKING THIS REQUEST: THE COURT REQUIRES YOU TO GIVE NOTICE TO THE OTHER PARENT.

I,_____, **hereby declare, under penalty of perjury, I will provide, by mailing or delivering, a copy of this Request to the other parent on the date this order is signed by the Court.**

DATED this _____ day of _____, 20_____.

_____
Signature (Parent or Attorney) Print Name

_____
Address or Contact Address City, State, Zip Telephone or Contact Telephone