# Stipulation to Modify Custody, Parenting Time, Child Support, and/or Spousal Support

## Instructions for Packet 4C

***Notice about these instructions and forms.***

*These instructions are not a complete statement of the law. They cover basic procedure for uncomplicated cases in which there has already been a judgment in a divorce, legal separation, or unmarried custody proceeding that both parties agree and now wish to modify. For legal information, please talk to a lawyer or visit your local law library. Each court has local rules, programs and procedures that may not be explained in these instructions.* ***Information about how to contact your local court may be found at the Lane County Circuit Court website: http://courts.oregon.gov/Lane.***

This set of forms and instructions will allow you to ask the court to modify a custody, parenting time, and/or child support order or judgment when parties agree. The court may terminate a party's obligation to pay child support if a change of custody is ordered, or adjust child support up or down if there has been a change in circumstances since the last child support order or judgment which warrants a modification.

Your request for modification should be filed in the circuit court that entered the judgment you are asking the court to modify. If either party lives in a different judicial district in Oregon than the one that entered that judgment, you may request that the case be transferred. If you want an Oregon court to modify a judgment from another state, we strongly urge you to consult with a lawyer. An Oregon court may not have jurisdiction to modify the out-of-state judgment.

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The forms that need to be filed for this process are listed below.

| 1. Starting your Case | 2 |
|---|---|
| Stipulation to Modify Custody, Parenting Time, Child Support, Spousal Support and Supplemental Judgment<br>Certificate re: Pending Child Support Proceedings and/or Existing Child Support Orders/ Judgments<br>UTCR 2.130 Confidential Information Form (CIF) *(one for each party)* (REQUIRED)<br>Notice of CIF Filing<br>Certificate of Mailing<br><br>Possible Attachments: Parenting Plan, Child Support Worksheets (required by UTCR if child support is involved) | |

**When filling out the forms, follow these directions:**

- The case heading includes your case number and the parties to the court case. If you are filing in the circuit court that entered the judgment you are attempting to modify, the case number and names of "Petitioner," "Respondent," or "Co-Petitioners" will stay the same. If the judgment you are asking the court to modify was entered in another court, you will be given a new case number, but the names of "Petitioner," "Respondent," or "Co-Petitioners" will stay the same.
- Make sure to put the same information in the caption on all copies and originals of documents you file with the court.
- Some forms have to be notarized or signed in the presence of a court clerk. You will need your picture ID for this. Many banks provide notary services.
- Many forms say on the bottom, "I certify that this is a true copy," and provide a place to sign. Don't sign this line on the original form or on your own copy. You need to sign this line only on the copies that are served on the other parent.
- Make yourself a copy of any document you are filing with the court. File the original with the court clerk.
- Keep the court informed of your current address so you get notice of all court dates. **You are not required to use your residential address on any court form.** You may use a contact address where you regularly check in. If you use a contact address, the court will assume that you will receive all notices sent to that address. **Your contact address will become public information.** Please make sure that you use an address that is ok for other people, including the respondent, to know. It must be an address in the state where you live where you can receive mail. If you use a contact

address, the court will assume that you will receive all notices sent to that address. **Note: If you fear for your safety, you may be able to obtain a non-disclosure order.** Consult with your local court for instructions as well as the appropriate forms.

## STEP 1: STARTING YOUR CASE

**Legal Issues to Consider.**

The Stipulation to Modify Custody, Parenting Time, Child Support, and/or Spousal Support and Supplemental Judgment is the document that finalizes your agreement, and contains your rights and responsibilities. All issues must be stipulated (agreed to) in order to use this form. Oregon law provides that a number of issues must be addressed in the judgment. Before you fill out the paperwork, you should think about how you want to handle these issues.

**Parenting Plan.** A parenting plan is required for cases involving a minor child. The plan sets out the schedule and rules for each parent's time with the child. The parenting plan may include safety provisions for the child if domestic violence, substance abuse, child abuse or other circumstances are involved in your case.

A mediator can help parents create a parenting plan. Information about parenting plans may also be available through your court's parent education program, the courthouse facilitator, or your local law library. **The Oregon Judicial Department and the State Family Law Advisory Committee have created a "*Basic Parenting Plan Guide for Parents*" with information about how to develop a plan, information about alternative schedules, and ages and stages of your child[ren] which should be considered in creating a plan. A sample parenting plan form is included in the *Guide*. The *Guide* may be downloaded from the OJD Family Law Website at: *http://www.courts.oregon.gov/familylaw*. There is also a "Safety Focused Parenting Plan Guide" on this website to help you develop a parenting plan where there are safety concerns for your children.**

Oregon law (ORS 107.159) prevents either parent from moving more than 60 additional miles away from the other parent without giving him or her and the court notice of the move. You may ask the judge to waive this requirement by checking the last box in the parenting plan section of the petition.

For information about child custody, you may call Tel-Law (1-800-452-4776) tape 902, or visit *www.osbar.org*.

**Child Support. IMPORTANT! Oregon law requires that the petitioning party submit a CERTIFICATE stating whether there are any pending child support proceedings or existing child support orders involving the parties' child[ren]. To comply with this requirement, fill out and submit the form called "CERTIFICATE re: PENDING CHILD SUPPORT PROCEEDINGS and/or EXISTING CHILD SUPPORT ORDERS/JUDGMENTS" in this packet. You will be required to attach a signed copy of any pre-existing child support orders.**

You may request that the court terminate or modify a child support obligation, make a change in the parent responsible for it, or change the amount. The amount of support, if ordered, will be determined by the Child Support Guidelines. The Guidelines have worksheets to help you figure out who should pay support and how much it should be. Information about child support, including the Guidelines and Worksheets, is on the Internet at:

*http://www.dcs.state.or.us/oregon_admin_rules/guidelines.htm*.

This website also has a Child Support Calculator which may help you to calculate the amount of child support which should be paid: *http://www.dcs.state.or.us/calculator*. Your local court facilitator, legal aid office or child support program may **also** be able to help you calculate the amount of support.

**Cash Medical Support.** In addition to cash child support, Oregon law may require the payment of cash medical support. If neither party has private health insurance for the child(ren) or if the health insurance is to be provided only by the parent that receives cash child support, the court is required to order cash medical support unless the court finds there are reasons not to order it. The purpose of cash medical support is to help defray the cost of health insurance and the cost of uninsured medical expenses. The judge cannot order you or the other party to pay cash medical support if you or the other party has a dependent child in the household who is eligible to receive public medical assistance or if you or the other party is eligible for public medical assistance yourselves. A party who makes no more than Oregon minimum wage cannot be ordered to pay cash medical support.

Oregon law requires the court to make sure that payment for the child(ren)'s uninsured medical expenses are addressed in the judgment. Although you may request that each party share the out-of-pocket medical expenses that exceed $250.00 per child per year, it may not be appropriate to request both the payment of cash medical support and the sharing of uninsured medical expenses. That is because one of the purposes of cash medical support is to help pay for the cost of uninsured medical expenses.

**Unmarried and Unemancipated Children at Least 18 and Under 21 Years of Age**. The 2005 Legislative Assembly amended Oregon law regarding unmarried unemancipated children who are at least 18 and under 21 years of age. The new law says that these children are necessary parties to all family law cases involving support. The Stipulation to Modify and Supplemental Judgment form that deals with support will have a line to write in the child's name, including them in the heading. The form also includes a place to sign underneath Petitioner and Respondent signatures agreeing to the judgment.

**Insurance.** Oregon law requires that the judgment address the issue of health insurance for any minor child involved in your case, and for payment of uninsured medical expenses. It also must provide for security for the payment of support, such as life insurance. In the health care coverage section, you must mark any of the options that apply to your family's situation. There are two major categories involved in determining health care coverage for the children: private, such as insurance available through employment, and public, such as the Oregon Health Plan.

If either you, your spouse/partner, or both of you have private health care coverage available for the children, you must fill out the "PRIVATE HEALTH CARE COVERAGE IS APPROPRIATE AND AVAILABLE" section. If *neither* you nor your spouse/partner have private insurance available for the children, you will fill out the section called: "NO PRIVATE INSURANCE IS APPROPRIATE OR AVAILABLE." Regardless of insurance availability, everyone must complete the section called: "RESPONSIBILITY FOR UNINSURED HEALTH EXPENSES." It may be appropriate to equally divide the expenses if no cash medical support is ordered or for the custodial parent to pay most or all of the uninsured expenses if cash medical support is being paid to that parent.

**Filling out the Forms.**

To have the court adopt your stipulated changes, fill out the forms listed below and file them with the clerk according to local procedure.

Fill out the following forms.

- *Stipulation to Modify Custody, Parenting Time, Child Support, and/or Spousal Support and Supplemental Judgment*
- *Certificate Re: Pending Child Support Proceedings and/or Existing Child Support Orders/Judgments*
- *Certificate of Mailing (if you or the other parent is or has received public assistance)*
- *UTCR 2.130 Confidential Information Form (CIF) (REQUIRED) (One for each party). If there are CIFs already filed in the original court proceeding but the information has changed, you will need to file another CIF and check the box at the top of the form that shows it is an amended CIF.*
- *Notice of CIF Filing*
- *Child Support Calculation Worksheet(s)* - See "Child Support" on page 2.

**Social Security numbers and other confidential personal information.**

There is certain personal information that can only be listed in a Confidential Information Form (CIF) and may not be listed in any of the other papers you file with the court. See the CIF information sheet that is part of this packet.

**Make copies.**

Make one copy of all of the forms for your records and another set for the other parent.

If you request that the court end the obligation to pay child support because of a requested change in custody, or change the amount of child support owed because of a change in parenting time or other circumstance, you are required to send a copy of the *Stipulation to Modify* to the Division of Child Support branch office in your county.

The branch office address may be found at *http://www.dcs.state.or.us/office_info/offices.htm* or in the "Local Family Law Practices and Programs" form for your local court. Fill out and file the *Certificate of Mailing* after you have mailed the copy.

**Have your documents reviewed.**

You may have your documents reviewed by a lawyer or a courthouse facilitator before you file. For information about how to find a lawyer, call the Oregon State Bar Lawyer Referral Service. If you are low income, you may have your documents reviewed for a smaller fee through the Oregon State Bar's Modest Means program, or you may call your local Legal Aid office. Contact numbers are listed in the "Local Family Law Practices and Procedures" for your court which may be attached to these instructions.

## STEP 2: RESOLVING YOUR CASE

**Payment of Fees.**

There is a filing fee to file a Modification. You may ask the court to defer payment of this fee, by filling out an "Application, Declaration and Order for Waiver or Deferral of Fees" form. You may obtain the form and a fee schedule from the court clerk or the Family Court Assistance Office. You will present the fee application to the Ex parte judge (see below) on the same day you present your stipulated modification

**The Final Judgment.**

The judgment finalizes your case and contains all of the issues decided through your agreement. If both parents agree on all issues, it may be prepared by either parent as long as it is reviewed and signed by both parents. When you have finished filling out your forms and the forms are signed and notarized by all parties, you must attend an Ex parte hearing, Monday through Friday from 8:30 to 8:50 a.m., to present your final documents to a judge. You do not need an appointment to attend. You must first check in with the cashiers on the second floor of the courthouse. You may submit a copy of your documents when you submit the originals. Once the Judge signs the Supplemental Judgment, the clerk will conform your copies. I**f your case involves child support, file an extra copy of the Supplemental Judgment with the court.**

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

| | | |
|---|---|---|
| In the Matter of: | ) | |
| | ) | Case No. _____ |
| _____, | ) | |
| Petitioner, | ) | STIPULATION TO MODIFY |
| and | ) | ☐ CUSTODY |
| | ) | ☐ PARENTING TIME |
| _____, | ) | ☐ CHILD SUPPORT |
| Respondent, | ) | ☐ SPOUSAL SUPPORT |
| | ) | AN D |
| and | ) | SUPPLEMENTAL JUDGMENT |
| | ) | [ORS 107.135; 107.174] |
| ☐ _____, | ) | |
| Child who is at least 18 and under 21 years | ) | |
| of age, unmarried and unemancipated. | ) | |
| (ORS 107.108) | ) | |

Based upon the request and stipulation of the parties, as shown by the notarized signatures below, and it appearing to the Court that a judgment of annulment, dissolution of marriage, separation, or establishing paternity, custody and parenting time was granted in this case on _____, 20___, in case number _____, in the _____ County Circuit Court, that the parties jointly request a modification of the custody, parenting time, child support, and/or spousal support provisions of this judgment; Now, therefore,

IT IS HEREBY ORDERED that:

**1. Custody:**

(a) ☐ The judgment with respect to custody remains in effect and unchanged.

(b) ☐ Petitioner ☐ Respondent is awarded sole custody of the child/ren: *(Names and years of birth)*,

_____

(c) ☐ The parties have agreed to joint custody of the following child/ren: *(Names and years of birth)*,

_____

as described in the attached parenting plan, labeled "Exhibit 1."

**2.** ☐ Father ☐ Mother shall have **parenting time** with the child/ren in accordance with ☐ the attached parenting plan, labeled "Exhibit 1," or as follows: _____

_____

☐ Neither parent shall move to a residence more than 60 miles further distant from the other parent without giving the other parent reasonable notice of the change of residence and providing a copy of such notice to the court, or ☐ the requirement of ORS 107.159 regarding notice of move is suspended for good cause found.

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**3. Child Support, including Cash Medical Support.**

(a) ☐ Child support as previously ordered remains in effect and unchanged.

(b) ☐ The Judgment is modified to terminate ☐ Petitioner's ☐ Respondent's support obligation effective _____ for the child/ren:_____

*(name(s) and year(s) of birth)*

**4. Cash Child Support.**

Complete either (a) or (b) below:

(a) ☐ Cash child support must be paid by ☐ Petitioner to Respondent (or) ☐ Respondent to Petitioner beginning on the ☐ first or ☐ _____ of the month following the date of the judgment and continuing on the same day of each month thereafter. The total payment per month is $_____ for _____ children.

The cash child support:

☐ Is the amount presumed to be appropriate under the support guidelines.

☐ Is different from the presumed appropriate amount of $_____ because (list reasons) _____.

(b) ☐ No cash child support is ordered in this judgment because:

☐ An order, ☐ including medical support, for child support in the monthly amount of $_____ has already been ordered in Circuit Court case number _____ in _____ County, Oregon.

☐ Other reason: _____

**5. Medical Support.** Complete section (a) or (b) below. Also complete section (c) or (d) below.

Complete (a) or (b):

**(a) Private Health Care Coverage is Appropriate and Available.**

☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent has/have appropriate private health care coverage available for the parties' child/ren through an employer, spouse, domestic partner or other source. ☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent is/are ordered to obtain and/or maintain this coverage throughout the period of the support obligation for the benefit of the parties' child/ren.

☐ Health care coverage is not ordered in this judgment because it has already been ordered in another case as described in section 4(b) above.

**(b) No Private Health Care Coverage is Appropriate or Available.**

☐ Neither Petitioner nor Respondent has appropriate private health care coverage available for the parties' child/ren. ☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent must provide appropriate private health care coverage for the child/ren when such coverage becomes available to them at a reasonable cost through any source.

☐ The custodial parent shall enroll or maintain the child/ren in public health care coverage.

Complete (c) or (d):

**(c) Cash Medical Support Ordered.**

☐ Because the parent receiving cash child support is ordered to maintain private health care coverage and the parent paying cash child support is not ordered to maintain private health insurance, in addition to cash child support ☐ Petitioner ☐ Respondent must pay $_____ for cash medical support to ☐ Petitioner ☐ Respondent, or

☐ Because neither parent has appropriate private health care coverage available for the parties' child/ren: ☐ Petitioner must pay cash medical support in the monthly amount of $_____ to Respondent and/or ☐ Respondent must pay cash medical support in the monthly amount of $_____ to Petitioner.

**(d) Cash Medical Support Not Ordered.**

☐ Cash medical support is not ordered for the following reasons:

☐ The parent paying cash child support is also providing health care coverage.

☐ Section (e) below requires the parties to share the cost of the child/ren's uninsured medical expenses.

☐ Petitioner's ☐ Respondent's gross monthly income is at or below the Oregon minimum wage for full-time employment.

☐ Other reason: _____

_____

**(e) Responsibility for Uninsured Health Expenses.**

After the custodial parent pays the first $250 per year per child, ☐ Petitioner must pay _____% and Respondent must pay _____% of the reasonably incurred uninsured health, accidental, dental, orthodontic, and optical costs incurred by the child/ren, including costs for prescriptions. This obligation is ☐ in addition to ☐ instead of any cash medical support ordered above in paragraph 5 as part of the child support award.

**NOTICE ABOUT CHANGE IN PRIVATE HEALTH INSURANCE ENROLLMENT STATUS**

If child support services are provided by the Division of Child Support, the obligor and obligee must inform the administrator, as defined in ORS 25.010(1), in writing of any change in private health insurance enrollment status within 10 days of the change. UTCR 8.020(2)

**6. Length of Child Support.**

Unless the child becomes self-supporting, emancipated, or married:

☐ The support ordered in paragraphs 4 and 5 above for each child shall continue until the child reaches eighteen (18) years of age.

☐ The support ordered in paragraphs 4 and 5 above for each child shall continue until the child reaches age 21 if the child qualifies for support as a child attending school as defined by Oregon law.

**NOTICE ABOUT PERIODIC REVIEWS**

If you are receiving child support services through the Department of Justice, either parent may request that the Department of Justice/Division of Child Support review the amount of support ordered after three years from the date the order took effect or at any time upon a substantial change of circumstances.

**7. Payment of Child Support**

Pursuant to ORS 25.378(1), an income withholding order shall be issued to enforce the child support obligation unless an exception is indicated below.

☐ **Exceptions to withholding.** Income withholding is not ordered at this time because there is no support arrearage, the paying parent has not previously been granted an exemption from withholding, and:

☐ The parents, and the State, if support rights are assigned, have agreed in writing to an alternative arrangement; or

☐ Good cause not to require withholding is found because there is proof of timely payment of previously-ordered support and income withholding would not be in the best interests of the child.

All payments of child support shall be made (check either (a) or (b) below):

(a) ☐ To the Oregon Department of Justice, Child Support Accounting Unit, P.O. Box 14506, Salem, Oregon, 97309 or ☐ by electronic payment withdrawal (EPW) or electronic funds transfer (EFT).

(b) ☐ Pursuant to the above exception, directly to ☐ Petitioner's ☐ Respondent's checking or savings account. A receipt of deposit shall be kept by the parent paying support as proof of payment. A canceled check is also prima facie evidence that payment has been made. The person receiving support shall provide the paying parent with current deposit slips and/or bank name, account name and account number.

**NOTICE OF INCOME WITHHOLDING**

This child support order is enforceable by income withholding under ORS 25.378 to 25.390, 25.414 to 25.372 and 25.375. Withholding shall occur immediately, whenever there is an arrearage at least equal to the support payment for one month, whenever the obligated parent requests such withholding, or whenever the obligee requests withholding for good cause. The District Attorney or, as appropriate, the Division of Child Support of the Department of Justice, will assist in securing such withholding. Exceptions may apply in some circumstances.

**8. Dependents for Tax Purposes.**

☐ Petitioner ☐ Respondent shall be entitled to claim the following child(ren) as dependent(s) for tax purposes beginning the year this judgment is entered (*list names)*: _____

_____

_____,

OR

☐ Other *(specify)*: _____

_____

_____

**9. Life Insurance Coverage for Child/ren.**

☐ Petitioner ☐ Respondent shall obtain and maintain life insurance for the benefit of the parties' child/ren throughout the period of the support obligation if he/she is insurable. The coverage shall be in the amount of $_____.

**NOTICE ABOUT PARENTING TIME AND CHILD SUPPORT**

The terms of child support and parenting time (visitation) are designed for the child's benefit and not the parents' benefit. You must pay support even if you are not receiving parenting time. You must comply with parenting time and visitation orders even if you are not receiving child support.

Violation of child support orders and visitation or parenting time orders is punishable by fine, imprisonment or other penalties.

Publicly funded help is available to establish, enforce, and modify child support orders. Paternity establishment services are also available. Contact your local district attorney, the domestic relations court clerk, or the Department of Justice at 1-800-850-0228 or 503-378-5567 for information.

Publicly funded help may be available to establish, enforce, and modify parenting time or visitation orders. Forms are available to enforce parenting time or visitation orders. Contact the domestic relations, civil court clerk or courthouse facilitator for information.

**10. Spousal Support**

The obligation of ☐ Petitioner ☐ Respondent to pay spousal support to ☐ Petitioner ☐ Respondent is terminated effective (list date) _____. ☐ All spousal support has been paid as of the date the obligation terminates. ☐ There is past spousal support due in the amount of $_____ as of (list date) _____.

☐ The spousal support obligation is modified as reflected in the money award language below.

**11. Unchanged Terms of Judgment Remain in Effect.** Any terms in the Judgment not changed by this Supplemental Judgment shall remain in full force and effect.

**12. Money Award.** Child Support Obligation ☐ included ☐ not included.
Spousal Support ☐ included ☐ not included.

| **Additional information** | **PETITIONER** | **RESPONDENT** |
|---|---|---|
| Full Name | | |
| Address or Contact Address | | |
| Attorney's Name, Telephone Number and Address (if applicable) | | |

| | | |
|---|---|---|
| Year of Birth | | |
| Last Four Digits of Driver License Number and State of Issuance | | |
| Last Four Digits of the Support Obligor's Social Security Number | | |
| **The following information is to be provided by any party entitled to receive a money award (a "judgment creditor") as listed in this Judgment.** | | |
| Others Entitled to Portions of Judgment Payable to PETITIONER | The following person(s) or public bod(ies) are known by Petitioner to be entitled to a portion of a payment made on the judgment (other than Petitioner's attorney): ☐ None or ☐ _____ _____ | |
| Others Entitled to Portions of Judgment Payable to RESPONDENT | The following person(s) or public bod(ies) are known by Respondent to be entitled to a portion of a payment made on the judgment (other than the Respondent's attorney): ☐ None or ☐ _____ _____ | |

| **Type of Judgment** | | **Amount of Judgment** |
|---|---|---|
| Child Support Award | WHO PAYS<br>☐ Petitioner<br>☐ Respondent | $_____ ☐ per month, of which $_____ is cash medical support.<br>Starting on ☐ the first day or (day)_____ of the month following the date of the judgment |
| | WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | |

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|---|---|---|
| Spousal Support Award | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | 1. $_____ per month starting on ☐ the first day or<br>☐ Other: _____ of the month following the date of the judgment, lasting until (date)_____, or the death of either party, whichever comes first; **or**<br><br>2. A lump sum payment of $_____ to be paid by (date): _____ |
| **SPOUSAL SUPPORT PAYMENTS ARE TAXABLE TO THE OBLIGEE SPOUSE AND DEDUCTIBLE TO THE OBLIGOR SPOUSE. ALL PAYMENTS TERMINATE UPON THE DEATH OF EITHER PARTY.** | | |
| Property Division (if applicable) | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | 1. $_____ per month, starting on the<br>☐ first day or ☐ Other:<br>_____ of the month following the date of the judgment until the total amount of $_____ is paid in full; **or**<br><br>2. A lump sum payment of $_____<br>to be paid by: _____ (date). |
| Prejudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.) | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | $_____ |
| Postjudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.) | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | Nine percent ( 9 %) per annum simple interest on the unpaid balance of the total judgment amount(s) of<br>$_____. Interest accrues from the date the judgment is entered and continues until fully paid. |

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| Accrued Arrears (if any, on judgments to be paid on a periodic basis) | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | 1. $_____ per month, starting on the ☐ first day or ☐ Other:_____ of the month following the date of the judgment until the total amount of $_ _____ is paid in full; **or**<br><br>2. A lump sum payment of $_____ to be paid by: _____ (date). |
| Costs and Service Expenses (e.g., filing fees, hearing fees, trial fees, process fees) | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | $_____ |
| Attorneys Fees (if any) | WHO PAYS<br>☐ Petitioner<br>☐ Respondent<br><br>WHO RECEIVES<br>☐ Petitioner<br>☐ Respondent | $_____ |

DATED this _____ day of _____, 20_____.

_____
Circuit Court Judge

_____
Print Name

**APPLICATION FOR FULL CHILD SUPPORT PROGRAM SERVICES:** By signing below, I apply for child support services, including enforcement, from the Child Support Program (CSP). Check the box in Paragraph 7(a) if you are requesting accounting and disbursement services only. (Note: If you never received TANF, tribal TANF or AFDC in any state, an annual $25 fee will apply if over $500 is collected and distributed to the family each year.)

_____ _____
☐ Petitioner, Signature Date

_____ _____
☐Respondent, Signature Date

**All parties have stipulated (agreed) to the terms of this Judgment.**

_____

**Petitioner, Signature**

State of _____ )
County of _____ )

This instrument was acknowledged before me on_____, 20_____, *(date)*

by _____ *(name of person(s))*.

_____

Notary Public for _____/Court Clerk
My Commission Expires:_____

_____

**Respondent, Signature**

State of _____ )
County of _____ )

This instrument was acknowledged before me on_____, 20_____, *(date)*

by _____ *(name of person(s))*.

_____

Notary Public for _____/Court Clerk
My Commission Expires: _____

☐ If applicable, child who is at least 18 and under 21 years of age, has agreed (stipulated to the terms of this judgment:

_____

**Child, Signature**

State of _____ )
County of _____ )

This instrument was acknowledged before me on_____, 20_____, *(date)*

by _____ *(name of person(s))*.

_____

Notary Public for _____/Court Clerk
My Commission Expires:_____

**Certificate of Document Preparation**. You are required to truthfully complete this certificate regarding the document you are filing with the court. Check all boxes and complete all blanks that apply:

☐ I selected this document for myself and I completed it without paid assistance.

☐ I paid or will pay money to _____ for assistance in preparing this form.

**Submitted by:**

_____

☐ Petitioner ☐ Respondent, Signature Print Name

_____

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

**I certify that this is a true copy:_____**, ☐ Petitioner ☐ Respondent, Signature

# Information about the Confidential Information Form (CIF)

**What is a CIF?**
Most court files may be viewed by the public. Uniform Trial Court Rule (UTCR) 2.130 requires certain confidential personal information to be protected from public disclosure. That is done by providing the information in a separate form. After you file your papers, the court keeps the form separate from the part of the court file that may be viewed by the public. The form is UTCR Form 2.130.1, known as the Confidential Information Form, or CIF.

**What information does a CIF make confidential?**
The information protected by the CIF is social security numbers, birth dates, driver license numbers, and former legal names. Also protected are the name, address, and telephone number of a party's employer.

The CIF should only be used to protect the information described above. There may be other information in your court papers that you do not want the public to be able to see, such as bank account or credit card numbers. The separate process for protecting that information is described in UTCR 2.100, which can be read at:

http://courts.oregon.gov/OJD/programs/utcr/utcrrules.page?.

**How do I know when I need to put information in the CIF?**
When a document filed with the court requires you to include information protected by a CIF, that information must **only** be provided to the court in a CIF and must not be listed in any other document to be filed. Where you would otherwise provide the information in the document to be filed you must make a note that the information has been provided in the CIF. For example, if a document requires a party's full social security number to be listed, you must not list the social security number, but must instead make a note on the document that the information has been filed under UTCR 2.130. **The online court forms already have that note on the form.**

**Do I need to file more than one CIF?**
In most cases, yes. You must fill out a CIF for yourself, and if the documents you are filing with the court require confidential personal information about the other party, you must also fill out a separate CIF with the other party's information. If your case involves children, you should include their information in *your* CIF. You do not need a separate CIF for your children.

If there is CIF information you do not know when you file your papers, or if the information changes during your case, you must file an amended CIF that provides the new or updated information.

The CIF rule requires you to redact – black out or erase – confidential personal information from any attachments to documents you file with the court and to make a note on the attachment that the information has been provided in the CIF. The only exception is when you are required to attach a court-certified document. Documents that are required to be court certified should not be altered in any way.

**Does the other party get copies of a CIF I file?**
You are not required to serve the CIFs on the other party, though you may share a CIF with the other party if you chose to do so. You *are* required to serve the other party with UTCR Form 2.130.2, which is a notice that a CIF has been filed. You must also file a certificate with the court showing that you served the other party with the notice that a CIF was filed.

There are steps the other party and other people can go through to ask the court to allow them access to a CIF that you have filed. UTCR 2.130 explains that process in detail, and also describes the circumstances under which the court must deny a request by someone else to view a CIF you have filed.

The CIF rule (UTCR 2.130) can be read at:
http://courts.oregon.gov/OJD/OSCA/cpsd/courtimprovement/familylaw/familylawforms.page?
and you can find additional information about the rule at:
http://courts.oregon.gov/OJD/OSCA/cpsd/courtimprovement/familylaw/familylawforms.page?

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

| | | |
|---|---|---|
| In the Matter of: | ) | Case No.:_____ |
| _____ | ) | |
| ☐Petitioner ☐Co-Petitioner, and | ) | **FAMILY LAW CONFIDENTIAL INFORMATION FORM (CIF)** |
| | ) | ☐ **Amended** |
| _____ | ) | |
| ☐Respondent ☐ Co-Petitioner. | ) | **This document is not accessible to the public or other parties. Exceptions may apply. See UTCR 2.130.** |
| | ) | |
| _____ | ) | |
| ☐ Child At Least 18 But Under 21 | ) | |

**<u>ATTENTION COURT STAFF:</u> THIS IS A RESTRICTED ACCESS DOCUMENT.**

**The information below is about: ☐ Petitioner ☐ Respondent ☐ Co-Petitioner: _____**

**☐ Child At Least 18 But Under 21:_____**

**☐ Other:_____**

**Name (Last, First, Middle): _____**

**The names of the parties and the children, as well as the children's ages, are NOT confidential.**

| |
|---|
| Former Legal Name (s) (if applicable): |
| Date of Birth: |
| Social Security Number: |
| Driver License (Number and State): |
| Name, Address, and Telephone Number of Employer: |

| Children's Names (Last, First, Middle) | Date of Birth | Social Security No. |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

Please attach an additional sheet if there are more than five children involved in the proceeding.

**I hereby declare that the above statements are true to the best of my knowledge and belief, and that I understand they are made for use as evidence in court and are subject to penalty for perjury.**

**Date:**_____ **Signature:**_____
**Type or Print Name:**_____

**COMPLETED AND SUBMITTED BY:**

☐ **Petitioner** ☐ **Respondent** ☐ **Co-Petitioner:**_____

☐ **Child who is at least 18 and under 21:**_____

☐ **Other:**_____

**NOTE TO COURT STAFF: Unless ordered or authorized under UTCR 2.130, this Confidential Information Form is <u>not available</u> to the <u>opposing party or his/her attorney</u>, or to the <u>public</u>; except for the state.**

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

| | | |
|---|---|---|
| In the Matter of: | ) | Case No.:_____ |
| _____ | ) | |
| ☐Petitioner ☐Co-Petitioner, and | ) | **FAMILY LAW CONFIDENTIAL INFORMATION FORM (CIF)** |
| | ) | ☐ **Amended** |
| _____ | ) | |
| ☐Respondent ☐ Co-Petitioner. | ) | **This document is not accessible to the public or other parties. Exceptions may apply. See UTCR 2.130.** |
| _____ | ) | |
| ☐ Child At Least 18 But Under 21 | ) | |

**<u>ATTENTION COURT STAFF:</u> THIS IS A RESTRICTED ACCESS DOCUMENT.**

**The information below is about: ☐ Petitioner ☐ Respondent ☐ Co-Petitioner: _____**

**☐ Child At Least 18 But Under 21:_____**

**☐ Other:_____**

**Name (Last, First, Middle): _____**

**The names of the parties and the children, as well as the children's ages, are NOT confidential.**

| |
|---|
| Former Legal Name (s) (if applicable): |
| Date of Birth: |
| Social Security Number: |
| Driver License (Number and State): |
| Name, Address, and Telephone Number of Employer: |

| Children's Names (Last, First, Middle) | Date of Birth | Social Security No. |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

Please attach an additional sheet if there are more than five children involved in the proceeding.

**I hereby declare that the above statements are true to the best of my knowledge and belief, and that I understand they are made for use as evidence in court and are subject to penalty for perjury.**

**Date:**_____ **Signature:**_____
**Type or Print Name:**_____

**COMPLETED AND SUBMITTED BY:**

☐ **Petitioner** ☐ **Respondent** ☐ **Co-Petitioner:**_____

☐ **Child who is at least 18 and under 21:**_____

☐ **Other:**_____

**NOTE TO COURT STAFF: Unless ordered or authorized under UTCR 2.130, this Confidential Information Form is <u>not available</u> to the <u>opposing party or his/her attorney</u>, or to the <u>public</u>; except for the state.**

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

| | | |
|---|---|---|
| In the Matter of: | ) | Case No.:_____ |
| _____ | ) | |
| ☐Petitioner ☐Co-Petitioner, | ) | **NOTICE OF FILING OF** |
| and | ) | ☐ **CONFIDENTIAL INFORMATION FORM (CIF)** |
| | ) | ☐ **Amended CIF** |
| _____ | ) | |
| ☐Respondent ☐ Co-Petitioner. | ) | |
| | ) | |
| | ) | |
| _____ | ) | |
| ☐ Child At Least 18 But Under 21 | ) | |

**NOTICE: Confidential Information Form Has Been Filed**

- Uniform Trial Court Rule (UTCR) 2.130 requires that parties to domestic relations cases place certain information about themselves and other parties in a CIF when such information is required in a document filed with the court.
- The CIF is not available for public inspection except as authorized by law.
- Parties are allowed to see a CIF that contains information about them.
- A party who wants to see a CIF that contains information about another party must ask for permission from the court or the other party by following the procedures set out in UTCR 2.130.

**I am the (check one box):**

☐ Petitioner ☐ Respondent ☐ Co-Petitioner:_____

☐ Child At Least 18 But Under 21:_____

☐ Other:_____

**I filed Confidential Information Forms with the court about the following parties to this case:**
(complete a section for each party for whom you have filled out a CIF)

1) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

2) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

3) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

4) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

Dated this_____day of_____, 20____.

_____

Signature Print Name

_____

Contact Address City, State, Zip Contact Telephone

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

| | | |
|---|---|---|
| In the Matter of ☐ the Marriage of: | ) | |
| | ) | |
| _____, | ) | Case No. _____ |
| Petitioner, | ) | |
| and | ) | CERTIFICATE RE: PENDING CHILD SUPPORT |
| | ) | PROCEEDINGS and/or EXISTING CHILD |
| _____, | ) | SUPPORT ORDERS/JUDGMENTS |
| Respondent. | ) | (UTCR 8.090) |
| | ) | |

I hereby certify that:

1. PENDING CHILD SUPPORT PROCEEDINGS *(include any child support matter being heard by either a court or agency as part of a dissolution, separation, annulment, paternity, juvenile court, support or modification case)*:

☐ There is no pending child support proceeding in this or any other state involving the parties' child/ren.

☐ There is a pending child support proceeding ☐ in Oregon ☐ in another state which involves the parties' child/ren as follows:

Name/County of Court or Agency where pending: _____
Agency Case Number: _____
Court Case Number: _____

2. EXISTING CHILD SUPPORT ORDERS OR JUDGMENTS *(include any order/judgment whether made by an agency or a court in this or any other state, and whether or not currently effective)*:

☐ There are no other child support orders/judgments in this or any other state involving the parties' child/ren.

☐ There is/are other child support orders/judgments involving the parties' child/ren, as follows:
ORDER/JUDGMENT #1 *(Attach a copy of the signed order)*
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

ORDER/JUDGMENT #2 *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

ORDER/JUDGMENT #3 *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

ORDER/JUDGMENT #4 *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

Attach additional sheets if necessary, labeled "Attachment 1 to Certificate Re: Child Support Proceedings and Orders."

**Certificate of Document Preparation**. You are required to truthfully complete this certificate regarding the document you are filing with the court. Check all boxes and complete all blanks that apply:

☐ I selected this document for myself and I completed it without paid assistance.
☐ I paid or will pay money to _____ for assistance in preparing this form.

DATED this _____ day of _____, 20_____.

_____
☐ Petitioner ☐ Respondent, Signature

_____
Print Name

_____
Address or Contact Address

_____
City, State, Zip Code

_____
Telephone or Contact Telephone

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

| | | |
|---|---|---|
| In the Matter of ☐ the Marriage of: | ) | |
| | ) | |
| _____, | ) | Case No. _____ |
| Petitioner, | ) | |
| and | ) | ☐PETITIONER'S ☐RESPONDENT'S |
| | ) | CERTIFICATE OF ☐MAILING ☐SERVICE |
| _____, | ) | TO THE DIVISION OF CHILD SUPPORT |
| Respondent. | ) | |

I certify that on _____, 20_____, I ☐mailed ☐delivered a true copy of the Ex Parte Motion for Order to Show Cause re: Modification of Judgment in the above case to the local branch office of the Department of Justice, Division of Child Support (*list address*): _____
_____

**Certificate of Document Preparation**. You are required to truthfully complete this certificate regarding the document you are filing with the court. Check all boxes and complete all blanks that apply:

☐ I selected this document for myself and I completed it without paid assistance.
☐ I paid or will pay money to _____ for assistance in preparing this form.

DATED this _____ day of _____, 20_____.

_____
☐Petitioner ☐Respondent, Signature

_____
Print Name

_____
Address or Contact Address

_____
City, State, Zip Code

_____
Telephone or Contact Telephone