Dissolution Forms and Instructions for Co-Petitioners
Packet Number 9A

Instructions

I. General Information:

A. Use black ink and print or type when you fill out your forms.

B. Always file the original forms with the clerk. You should always make yourself an extra copy before you file any form with the clerk.

C. Keep the court informed of your current address. It is your responsibility to keep the court informed of your current address. **You are not required to use your residential address on any court form.** You may use a contact address where you regularly check in. **Your contact address will become public information**. Please make sure you use an address that is okay for other people, including the other party, 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.

D. Case Heading. Make sure you fill in your names in the blanks at the top of the forms using your full names (first, middle or middle initial, last). Print the names the same way on all of the forms.

E. Case number. The clerk will give you a case number when you file your papers. Don't worry about filling out this part of the case heading until that time. Make sure you put this number on all your copies and papers you file with the court.

F. Signing the forms. Some of the forms in this packet have to be notarized, or signed in the presence of a court clerk. Either way, you should wait to sign your papers in front of a notary or court clerk, and should bring picture ID with you. Many local banks provide notary services.

G. Statutory Restraining Order. Oregon law requires both Co-Petitioners to obey a restraining order preventing *either party* from dissipating (selling, destroying, removing, disposing of) real or personal property, making unilateral (without the agreement of the other party) changes to insurance policies, and making extraordinary expenditures. Expenditures that are necessary for the safety or welfare of the parties are not prohibited. **By filing your co-petition, you agree to be bound by the terms of this order**. The order is effective immediately upon filing of the co-petition. If either co-petitioner violates the order, s/he may be subject to sanctions. The *"Notice of Statutory Restraining Order Preventing the Dissipation of Assets in Domestic Relations Actions"* is attached to the Petition (form 1).

H. 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.

I. 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 (form 5). You will be required to attach signed copies of any pre-existing child support orders.

In most cases, the court will order child support if the parties have a child and no child support order already exists. 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. Support is typically withheld from wages unless an exception is allowed for direct deposit to the other parent's checking or savings account, or, if support enforcement services are being provided to either parent, as an "electronic payment withdrawal (EPW) or electronic funds transfer (EFT)" to a Department of Justice account. (EPW and EFT are procedures whereby funds are automatically withdrawn from a checking/savings account as authorized by the account holder.) Information about child support, including the Guidelines, Worksheets and a Child Support Calculator, is on the Internet at: http://www.oregonchildsupport.gov.

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.

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.

J. 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 Petition form that deals with support will have a line to write in the child=s name, including them in the heading. The Judgment form will have a place indicating how the child has been involved in the case, and if applicable, a place to sign underneath Petitioner and Respondent signatures agreeing to the judgment. As a party to the case, these children must be legally served with all the required documents. After they are served, children **may** sign a Waiver of Further Appearance and Consent to Entry of Judgment form found in Packet 6J if the child does not choose to participate further in the case.

K. Optional Forms. (Available upon request)

*Waiver of Personal Service form. This form allows you to waive your right to personal service. After the judgment is final, you have the right to be personally served with a contempt charge if your ex-spouse believes you haven=t followed the provisions of the judgment. If you want to keep your residential address confidential, this form allows you to list a mailing address, business address or a specified agent, and waive your right to be personally served (to have the papers actually delivered to you in person). Should you choose to use this form, you are responsible for making sure that all papers delivered to the specified address are actually delivered to you.

* Application, Declaration and Order for Waiver or Deferral of Fees. This form allows you to defer payment of the filing fees until final judgment if you are unable to pay the fees at the time you file your petition.

II. Completing the documents

You must: (1) fill out the forms and (2) file the forms with the clerk.

A. Fill out the forms.

1. Petition for Dissolution of Marriage.
2. Certificate of Document Preparation.
3. UTCR 2.130 Confidential Information Form (CIF). *(One for each party)*
4. Notice of CIF Filing
5. Certificate re: Pending Child Support Proceedings and/or Existing Child

Support Orders/Judgments.
6. Petitioner's Certificate of Mailing. Use this form only if you or your spouse are receiving public assistance (see section III B).
Record of Dissolution of Marriage. *(Vital Statistics Form)*

B. Have your documents reviewed.

Please have your documents reviewed by either the Family Court Assistance Office or your Attorney. You should have an attorney advise you on these forms if either of you have a retirement account. You may schedule an appointment for the Family Court Assistance Office to review your documents by calling 541-682-4302.

III. Filing the documents.

A. File the forms with the clerk.

When you have finished filling out your forms, file the following original forms with the clerk: (1) Petition for Dissolution, (2) Certificate of Document Preparation, (3) UTCR 2.130 Confidential Information Forms (CIFs), (4) Notice of CIF Filing, (5) Certificate re: Pending Child Support Proceedings and/or Existing Child Support Orders/Judgments, and the Record of Dissolution of Marriage. You should make one copy of the forms you file with the clerk for your own record. You must also make one additional copy of the UTCR 2.130 Confidential Information Forms (form 3) if child support is involved in your case. You are required to submit these copies to the court at the time you finalize your case **if child support was ordered**. The copies of form 3 along with a copy of your General Judgment (form 10) will be sent to Child Support Services.

Payment of fees. When you file your petition for divorce, you must pay a filing fee. 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 need to attend an Ex parte hearing to have a judge make a decision on the fee deferral/waiver. Ex parte takes place Monday through Friday from 8:30 to 8:50 a.m., it is a hearing where judges are available to sign documents and you do not need to have an appointment to attend. You will not be allowed to file your divorce petition until you either pay the fee, or get the deferral form signed by a judge. (If the court "defers" your fee, you will be required to pay all deferred fees back to the court at a later date.) You must file your forms on the same day you see a judge for the fee deferral/waiver.

B. Serve Division of Child Support.

If you or your spouse are receiving public assistance (in relation to a child; see ORS 418.035(2)), you also need to serve by mail or personally deliver a true copy of the Petition for Dissolution of Marriage to the Administrator of the Division of Child Support (**Division of Child Support, Department of Justice, 165 E. 7th Avenue, Suite 300, Eugene, Oregon 97401**). After you have mailed or delivered a true copy of the Petition, you must fill out and file form (6) with the court clerk.

C. Serving children who are necessary parties.

Because all unmarried, unemancipated children at least 18 and under 21 years of age are necessary parties to the case, they must also be served. These children will also need to be served with copies of the forms you have filed with the clerk.

IV. Focus on Children

Complete the "Focus on Children" registration form within 15 days of filing your petition and mail or deliver the form to the address provided on the registration. You may also register online at www.lanecounty.org/FamilyMediation, follow the links for Focus on Children. You must attend the class before the divorce action is completed. If you are unable to pay the required fee, contact the Focus on Children office directly at 541-682-3962.

V. Finalizing Your Divorce

A. 1. Once you have completed the previous steps, you may fill out and present the following forms to the judge to resolve your case.

7. Co-Petitioner's Ex Parte Motion for Order Allowing Entry of Judgment on Affidavit in Lieu of Hearing.
8. Order Allowing Judgment on Affidavit in Lieu of Hearing
9. Co-Petitioner's Affidavit Supporting Judgment of Dissolution.
10. General Judgment of Dissolution (along with one copy if child or spousal support was ordered)

2. Are the Documents signed? 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 to have an appointment to attend. You must first check in with the civil/domestic 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 your documents, the clerk will conform your copies.

If there were no existing child support orders when this case was filed you are finished. If there was an existing child support order, and the final judgment in this case says that the other order is now "satisfied" or "superseded" (see page 8 of the judgment), the parties to this case are responsible for providing a certified copy of the judgment in this case to the court or agency that issued the first child support order.

DISSOLUTION PROCESS FOR CO-PETITIONERS (Packet No. 9A)

Step 1.	Step. 2
Fill out the following forms: 1. Petition for Dissolution 2. Certificate of Document Preparation 3. UTCR 2.130 Confidential Information Form (CIF) (one for each party). 4. Notice of CIF Filing 5. Certificate re: Pending/Existing Child Support Orders Record of Dissolution of Marriage or Annulment *(Vital Statistics Form)*	File the original forms listed in step one with the clerk and pay your filing fee (or attend Ex parte and file your fee application if you want to request that your fees be deferred).
Step. 3	**Step 4.**
Register for the Focus on Children program within 15 days of filing your petition. If necessary, serve the Division of Child Support and file the Certificate of Mailing (form 6) with the court. If required, serve any child who is a necessary party to the case and file proof of such service with the court. (Contact the Family Court Assistance Office if you need an Affidavit of Proof of Service form.)	You may see a judge at an Ex parte hearing and file the rest of the forms (forms 7, 8, 9, and 10) with the clerk after having completed the previous steps.

FORM 1

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

In the Matter of the Marriage of:	)	
	)	Case No._____
_____,	)	
Co-Petitioner,	)	CO-PETITION FOR DISSOLUTION OF
and	)	MARRIAGE (with children)
	)	
_____,	)	DOMESTIC RELATIONS CASE SUBJECT
Co-Petitioner.	)	TO FEE UNDER ORS 21.111
	)	
□_____,	)	NOT SUBJECT TO MANDATORY
Child who is **at least** 18 and under 21 years	)	ARBITRATION
of age, unmarried and unemancipated.		
(ORS 107.108)		

1.

We request a dissolution of marriage because irreconcilable differences between the husband and wife have caused the irremediable breakdown of the marriage.

2.

No domestic relations suit or support petition involving this marriage is pending in this state or any other state.

3.

By filing this petition, we acknowledge that we are bound by the terms of the statutory restraining order prohibiting either party from disposing of marital assets, a copy of which we have received and read, and understand that this restraining order is effective immediately upon filing this petition.

4.

☐ We are residents of Oregon and have been continuously for the past six months before filing this petition. **OR** ☐ Co-Petitioner_____is a resident of Oregon and has been continuously for the past six months before filing this petition.

☐ I certify that at least one spouse currently lives in the county in which this petition is being filed.

5.

There have been_____child/ren under 21 years of age born to or adopted by the Petitioners prior to or during the marriage. The name(s), date(s) of birth, social security number(s) and address(es) of the child/ren of this marriage are:

Name	Date of Birth	Social Security No.	Contact Address
	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF	
	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF	
	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF	

☐ Additional page attached; see section labeled "paragraph 5 continued."

☐ The wife is pregnant with the husband's child. The expected date of the child's birth is _____.

☐ The wife is not pregnant at this time.

☐ There are no minor children of the marriage.

6.

☐ Child/ren named_____were born to the wife on the following dates_____Do not list. Provide by UTCR 2.130 CIF_____, during this marriage. The husband is not the father of the child/ren. The wife was not cohabitating with the husband when the child/ren were conceived.

☐ The wife is pregnant at this time and the husband is not the father of this child. The wife was not cohabiting with the husband when this child was conceived. The expected date of the child's birth is _____.

7.

CHILD CUSTODY JURISDICTION

Home State Jurisdiction:

☐ The child/ren have lived in Oregon for the last six months. (If you marked the first option, skip to section 8.)

☐ The child/ren are not now living in Oregon, but have lived in Oregon for at least six consecutive months (at least part of which period occurred in the last six months), and a parent or acting parent continues to live in Oregon.

Significant Connection Jurisdiction:

☐ The child/ren and_____have significant connections to
(Name of parent or caretaker)
Oregon and substantial evidence about the child/ren's care, protection, training, and personal relationships is available here, **AND:**

☐ There is no 'home state' because the child/ren have not lived in any one state for six consecutive months, at least a part of which period occurred in the last six months; or

☐ The 'home state' has declined jurisdiction in favor of Oregon.

Temporary Emergency Jurisdiction:

☐ The child/ren are physically present in Oregon and have been abandoned or an emergency exists requiring the child/ren's protection because the child/ren, sibling(s), and/or parent are subjected to or threatened with mistreatment or abuse.

☐ There <u>is not</u> another child custody proceeding pending in a court of a state having jurisdiction under ORS 109.741 – 109.747. This Order based on Temporary Emergency Jurisdiction remains in effect until an Order is obtained from a Court of a state having 'home state' or 'significant connection' jurisdiction. If a child custody proceeding has not been or is not commenced in a court of a state having

either 'home state' or 'significant connection' jurisdiction, this Order becomes a final determination if Oregon becomes the 'home state' of the child/ren.

☐ There is another child custody proceeding pending in a court of a state having jurisdiction under ORS 109.741 – 109.747. This Order based on Temporary Emergency Jurisdiction remains in effect until the_____day of_____,20____, or until an Order is obtained from the other state within that period.

☐ **Oregon does not have jurisdiction** under the Uniform Child Custody Jurisdiction Act because:_____

_____

_____

8.

The places where the minor child/ren of the parties have lived in the last five years and the names of the persons with whom the child/ren have /has resided are:

Dates	County/State	With Whom	Which Children
From:_____To:_____	_____	_____	_____
From:_____To:_____	_____	_____	_____
From:_____To:_____	_____	_____	_____
From:_____To:_____	_____	_____	_____

☐ Additional page attached; see section labeled "paragraph 8 continued."

The current addresses of the persons listed above with whom the minor child/ren have lived are:

Name	Contact Address
_____	_____
_____	_____
_____	_____
_____	_____

9.

☐ Petitioners have not participated in any litigation concerning the custody, visitation, parenting time or placement of the child/ren in this or any other state.

☐ Petitioners have participated in the following litigation regarding the child/ren's custody, visitation, parenting time or placement:

Name of Court	State	Date	Result

10.

We do not know of any other custody, visitation, parenting time or placement proceeding involving the child/ren pending in this or any other state ☐ except for:_____

_____

11.

We do not know of any person other than ourselves who has physical custody of the child/ren or who claims to have custody, visitation or parenting time rights ☐ except for:_____

_____

PARENTING PLAN (CUSTODY AND PARENTING TIME)

12.

☐ Husband ☐ Wife ☐ Both parties is/are fit and proper person(s) to be awarded custody of the parties' minor child/ren. Custody of the child/ren should be awarded as follows:

☐ Wife should be awarded custody of the following child/ren:_____

_____

☐ Husband should be awarded custody of the following child/ren:_____

_____

☐ The parties have agreed to joint custody of the following child/ren:_____

_____

☐ Husband ☐ Wife ☐ Both parties should have reasonable parenting time with the child/ren.

☐ Specific parenting time should be as follows:_____

_____

_____

_____

_____

_____

☐ See attached parenting plan, labeled "Exhibit 1."

☐ _____ should not be granted parenting time because this would endanger the health and safety of the child/ren. **State supporting facts:**_____

_____

☐ Wife and Husband should each provide contact addresses and telephone numbers to the other and notify each other of any emergency circumstances or substantial changes in the child/ren's health.

☐ Petitioners should be allowed to move more than 60 miles further distant from the other parent without advance notice because good cause exists.

CHILD SUPPORT

(INCLUDING HEALTH CARE COVERAGE AND CASH MEDICAL SUPPORT)

13.

A. **Other Pending Child Support Cases.** *(Check one.)*

☐ No other agency or court child support proceeding is currently pending *(include any child support matter being heard as part of a dissolution, separation, annulment, paternity, support or modification case).*

☐ There is/are other child support proceeding(s) currently pending in either an agency or court case as set forth in the CERTIFICATE RE: PENDING CHILD SUPPORT PROCEEDING and/or EXISTING CHILD SUPPORT ORDER filed in this case.

B. **Other Child Support Orders.** *(Check one.)*

☐ No other child support orders, from an agency or court, are currently in effect in the State of Oregon or any other state.

☐ There is/are other child support orders from an agency or court as set forth in the CERTIFICATE RE: PENDING CHILD SUPPORT PROCEEDING and/or EXISTING CHILD SUPPORT ORDERS/JUDGMENTS filed in this case.

C. **Currently Effective Child Support Order.** *(Check any that apply.)*

☐ The following child support order/s is/are currently in effect: _____

_____

(*List state, court/agency, case number, date of order*)

☐ This order should remain in place ☐ and includes provisions for medical support for the child/ren, or

☐ This order is from an Oregon court or agency, one of the parents or the child/ren receiving support still resides in Oregon and the order should be changed because circumstances have changed since the last order was entered.

State facts showing how circumstances have changed: _____

_____

_____

D. **Cash Child Support.** Complete either (1) or (2) below:

(1) ☐ Cash child support should be paid by Co-Petitioner (write name) _____ to Co-Petitioner (write name)_____

beginning on the ☐ first or ☐ _____ day of the month following the date of the judgment and continuing on the same day of each month thereafter. The total payment per month should be:

☐ Determined under the Oregon child support guidelines prior to judgment.

☐$_____ for _____ child/ren, ☐which is the presumed correct amount.

☐ The amount of support presumed correct under the guidelines would be unjust or inappropriate because _____.

(The reasons must also be shown on the support worksheets you attach to this petition.)

☐ The support for each child should continue until the child reaches eighteen (18) years of age, or

☐ The support for each child should continue until age 21 if the child qualifies for support as a child attending school as defined in ORS 107.108 unless the child becomes self-supporting, emancipated, or married.

(2) ☐ 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: _____

_____

E. **Medical Support.** Complete section (1) or (2) below. Also complete section (3) or (4) below.

Complete (1) or (2):

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

☐ Co-Petitioner _____ ☐ Both Co-Petitioners has/have appropriate private health care coverage available for the parties' child/ren through an employer, spouse, domestic partner or other source. ☐ Co-Petitioner _____ ☐ Both Co-Petitioners should be required to obtain and maintain this coverage throughout the period of the support obligation for the benefit of the parties' child/ren.

☐ Health care coverage has already been ordered in another case as described above.

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

☐ Neither Co-Petitioner has appropriate private health care coverage available for the parties' child/ren. ☐ Co- Petitioner _____☐ Both Co-Petitioners should be ordered to 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 should enroll in public health care coverage.

☐ The child/ren are currently enrolled in public health care coverage.

Complete (3) or (4):

(3) **Cash Medical Support Should Be 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, in addition to cash child support ☐ Co-Petitioner _____should pay $ for cash medical support to ☐ Co-Petitioner _____, or

☐ Neither parent has appropriate private health care coverage available for the parties' child/ren. ☐ Co-Petitioner _____should pay cash medical support in the monthly amount of $_____ to Co-Petitioner _____.

(4) **Cash Medical Support Should Not Be Ordered.**

☐ Cash medical support should not be ordered for the following reasons:

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

☐ Co-Petitioner_____'s gross monthly income is at or below the Oregon minimum wage for full-time employment or is eligible for Oregon public assistance.

☐ We are requesting that the parties share the cost of the child/ren's uninsured medical expenses.

☐ Cash medical has already been ordered in another case as described above.

☐ Other reason: _____

_____

☐ All payments of child support should be made to the Department of Justice, Child Support Accounting Unit, P.O. Box 14506, Salem, Oregon, 97309 ☐ **by electronic payment withdrawal (EPW) or electronic funds transfer (EFT)**. In addition, support for a child attending school (between the ages of 18 and 21) as defined by Oregon law shall be distributed by the Department of Justice directly to the child subject to ORS 107.108.

☐ ***(Applies only if support enforcement services are not being provided.)***

Co-Petitioners request an exception to the income withholding requirement of ORS 25.378 allowing payment to be made directly to ☐ Co-Petitioner _____'s checking or savings account. A receipt of deposit should be kept by the parent paying support as proof of payment. The parent receiving support should provide the paying parent with current deposit slips and/or bank name, account name, and account number.

F. RESPONSIBILITY FOR UNINSURED HEALTH EXPENSES.

☐ Co-Petitioner _____ should pay _____% ☐ and Co-Petitioner _____ should pay _____% of the uninsured HEALTH, ACCIDENT, DENTAL, ORTHODONTIC, AND OPTICAL HEALTH costs incurred by the child/ren. ☐This obligation is in addition to any cash medical support ordered.

G. **TAX DEPENDENTS.** *(Check one.)*

☐ Co-Petitioner_____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)*: _____

_____

LIFE INSURANCE COVERAGE FOR CHILDREN

14.

☐ Husband ☐ Wife should obtain and maintain life insurance for the benefit of the parties' child/ren throughout the period of the support obligation. The coverage should be in an amount sufficient to provide continued support, in the event of the paying parent's death, at least at the level of and for the duration of the support obligation.

SPOUSAL SUPPORT AND LIFE INSURANCE

15.

☐ No spousal support or life insurance claims are made in this case (skip the rest of paragraph 15).

TRANSITIONAL SPOUSAL SUPPORT

☐ Transitional support should be paid by _____ to_____

Payments should be made in the following manner:

☐ In monthly installments of $ _____, beginning on the first day of the month following the date of the judgment and continuing on the first day of each month thereafter until_____ (date); **or**

☐ In one payment of $_____, due on_____ (date).

☐ Other:_____

COMPENSATORY SPOUSAL SUPPORT

☐ Compensatory support should be paid by _____ to_____

Payments should be made in the following manner:

☐ In monthly installments of $ _____, beginning on the first day of the month following the date of the judgment and continuing on the first day of each month thereafter until_____ (date); **or**

☐ In one payment of $_____, due on_____ (date).

☐ Other:_____

SPOUSAL MAINTENANCE

☐ Spousal maintenance should be paid by _____ to_____

Payments should be made in the following manner:

☐ In monthly installments of $ _____, beginning on the first day of the month following the date of the judgment and continuing on the first day of each month thereafter until_____ (date); **or**

☐ In one payment of $_____, due on_____ (date).

☐ Other:_____

Spousal support payments are taxable to the obligee spouse and deductible to the obligor spouse. All payments terminate upon the death of either party.

All payments of spousal support should be made:

☐ To the Oregon Department of Justice, P.O. Box 14506, Salem, Oregon, 97309. Petitioners requests that collection, accounting, disbursement and enforcement services be provided by the State of Oregon's Department of Justice; **or**

☐ Directly into _____'s checking or savings account. A receipt of deposit should be kept by the paying spouse as proof of payment. The spouse receiving support should

provide the paying spouse with current deposit slips and/or bank name, account name, and account number.

☐ If child support is also ordered in this case and if enforcement services are provided through the State of Oregon's Department of Human Resources, the spousal support order should be enforceable by income withholding under ORS 25.311.

☐ Husband ☐ Wife should obtain and maintain life insurance for the benefit of the ☐ Husband ☐ Wife throughout the period of the support obligation. The paying spouse should maintain coverage in an amount sufficient to provide, in the event of the paying spouse's death, continued support at least at the level of and for the duration of the support obligation.

REAL PROPERTY PROVISIONS

16.

☐ Neither wife nor husband has any interest in any real property located in this or any other state.

☐ Husband ☐ Wife ☐ both Husband and wife has/have an interest in real property located at the address of:_____

_____

☐ This property should be distributed as follows:_____

_____

_____

_____

☐ The legal description of the real property is attached as Exhibit_____ and incorporated in this petition.

☐ Distribution of this property is not within the jurisdiction of this court.

PERSONAL PROPERTY DISTRIBUTION

17.

☐ The wife and husband have divided between them all personal effects, household goods, and other personal property they own separately or together, and neither should claim those items now in possession of the other.

☐ The wife should be awarded the following personal property:_____

_____

_____

_____

☐ The wife should be awarded her retirement benefits, pension plan, profit-sharing plan, deferred-compensation plan, and/or stock option plan held by wife's employer, free of any interest in the husband.

☐ The husband should be awarded the following personal property:_____

_____

_____

_____

☐ The husband should be awarded his retirement benefits, pension plan, profit-sharing plan, deferred-compensation plan, and/or stock option plan held by husband's employer, free of any interest in the wife.

☐ Additional page attached; see section labeled "paragraph 17 continued."

DISTRIBUTION OF DEBTS

18.

Each party shall be responsible for the payment of all debts incurred by him or her individually since the date of the separation; all debts which are distributed to him or her by the court; and all debts which are secured by property distributed to that party. Also, if any creditor asks the spouse not responsible for a debt to pay all or a portion of it, and he or she does so, the spouse responsible for that

debt shall reimburse the other spouse for any monies he/she paid to the creditor after the date this judgment was entered.

☐ There are no outstanding debts of this marriage.

☐ Husband should be required to pay the debts listed below.

Name of Creditor	What debt is for	Amount

☐ Wife should be required to pay the debts listed below.

Name of Creditor	What debt is for	Amount

19.

Within 30 days of the date of judgment, each party should execute, acknowledge, and deliver whatever documents are necessary to accomplish the distribution of debts and property ordered by the court.

FORMER NAME

20.

☐ Wife's ☐ Husband's former name of_____, should be restored.

COURT COSTS AND FEES

21.

Deferred Costs and Fees:

☐ Husband ☐ Wife should be liable for ☐ one-half ☐ all the court costs and service fees that were deferred.

☐ The State of Oregon should have judgment against ☐ Husband ☐ Wife for ☐ one-half ☐ all of the court costs.

☐ The county of _____ should have judgment against ☐ Husband ☐ Wife for ☐ one-half ☐ all of the service fees.

Court Costs and Fees Paid by the Parties

☐ Husband ☐ Wife should be liable for ☐ one-half ☐ all the court costs and service fees that have been paid in this suit.

☐ Husband ☐ Wife should have a judgment against ☐ Husband ☐ Wife for ☐ one-half ☐ all of these costs.

WHEREFORE, petitioners pray for a judgment granting the relief petitioned for above, and other equitable relief that the Court deems just.

STATE OF_____)
)ss.
County of_____)

We, _____ being duly sworn, say that we are co-petitioners in this matter and that the foregoing Petition is true and correct to the best of our knowledge.

_____	_____
Co-Petitioner, Pro se (signature)	Co-Petitioner, Pro se (signature)
_____	_____
Print name	Print name
_____	_____
Contact Address	Contact Address
_____	_____
City, State, Zip Code	City, State, Zip Code
_____	_____
Contact Telephone	Contact Telephone

SUBSCRIBED AND SWORN to before me this_____ day of_____,_____ by_____.

_____

Notary Public for_____/Court Clerk

My Commission Expires:_____

SUBSCRIBED AND SWORN to before me this_____ day of_____,_____ by_____.

_____

Notary Public for_____/Court Clerk

My Commission Expires:_____

[Attach to Summons per ORS 107.093(5)]

NOTICE OF STATUTORY RESTRAINING ORDER PREVENTING THE DISSIPATION OF ASSETS IN DOMESTIC RELATIONS ACTIONS

REVIEW THIS NOTICE CAREFULLY. **BOTH PARTIES MUST OBEY EACH PROVISION OF THIS ORDER TO AVOID VIOLATION OF THE LAW.** YOU HAVE THE RIGHT TO A HEARING. SEE INFORMATION BELOW.

TO THE PETITIONER AND RESPONDENT:

Under ORS 107.093 and UTCR 8.080, Petitioner and Respondent must not:

Insurance Policies
(1) Cancel, modify, terminate or allow to lapse for nonpayment of premiums any policy of health insurance, homeowner or renter insurance, or automobile insurance that one party maintains to provide coverage for the other party or a minor child of the parties, or any life insurance policy that names either of the parties or a minor child of the parties as a beneficiary.

Insurance Beneficiaries
(2) Change beneficiaries or covered parties under any policy of health insurance, homeowner or renter insurance, or automobile insurance that one party maintains to provide coverage for the other party or a minor child of the parties, or any life insurance policy.

Property
(3) Transfer, encumber *(i.e., mortgage, lien, borrow against)*, conceal, or dispose of property in which the other party has an interest, in any manner, without written consent of the other party or an order of the court, except in the usual course of business or for necessities of life.

Expenses
(4) Make extraordinary expenditures without providing written notice and an accounting of the extraordinary expenditures to the other party.

EXCEPTIONS:
Paragraphs (3) and (4) do not apply to payment by either party of:
(a) Attorney fees in this action;
(b) Real estate and income taxes;
(c) Mental health therapy expenses for either party or a minor child of the parties; or
(d) Expenses necessary to provide for the safety and welfare of a party or a minor child of the parties.

EFFECTIVE DATE:
The above provisions are in effect immediately upon service of the *Petition* and *Summons* on the respondent. They remain in effect until a final judgment is issued, until the petition is dismissed, or until further order of the court.

RIGHT TO REQUEST A HEARING

Either Petitioner or Respondent may request a hearing to modify or terminate one or more terms of this restraining order, by filing with the court the *Request for Hearing re: Statutory Restraining Order* form specified in Form 8.080.3 in the UTCR Appendix of Forms.

FORM 2

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

In the Matter of the Marriage of:	)	
	)	
_____,	)	Case No._____
Co-Petitioner,	)	
and	)	CERTIFICATE OF
	)	DOCUMENT PREPARATION
_____,	)	
Co-Petitioner.	)	

You are required to truthfully complete this certificate regarding the document(s) you are filing with the court. Check or complete all blanks that apply. I certify that:

☐ I selected the document(s) for myself and completed it without paid assistance.

☐ I was provided the document(s) by an attorney.

☐ I paid or will pay money to_____for assistance in preparing the document(s)/form(s).

DATED this_____day of_____,_____.

_____
(Signature)

_____
(Print Name)

_____
(Contact Address)

_____
(City, State, Zip code)

_____
(Contact Telephone)

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?

FORM 3

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.

FORM 3

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.

FORM 4

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

FORM 5

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

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

We 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:

<u>ORDER/JUDGMENT #1</u> *(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:

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

DATED this _____ day of _____, 20_____.

_____	_____
Signature	Signature
_____	_____
Print Name	Print Name
_____	_____
Contact Address	Contact Address
_____	_____
City, State, Zip Code	City, State, Zip Code
_____	_____
Contact Telephone	Contact Telephone

FORM 6

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

In the Matter of the Marriage of:	)	
	)	
_____,	)	Case No._____
Co-Petitioner,	)	
and	)	CERTIFICATE OF MAILING/SERVICE
	)	TO DCS
_____,	)	
Co-Petitioner.	)	

I certify that on_____,_____, I ☐mailed☐ delivered a true copy of the Petition of Dissolution of Marriage in the above case to the Division of Child Support Services of the Oregon Department of Justice at 165 E. 7th Avenue, Suite 300, Eugene, Oregon 97401.

DATED this_____day of_____,_____.

_____
(Signature)

_____
(Print Name)

_____
(Contact Address)

_____
(City, State, Zip code)

_____
(Contact Telephone)

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 completed it without paid assistance.

☐ I was provided this document by an attorney

☐ I paid or will pay money to_____for assistance in preparing this document/form.

FORM 7

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

In the Matter of the Marriage of:	)	
	)	
_____,	)	Case No._____
Co-Petitioner,	)	
and	)	CO-PETITIONER'S EX PARTE MOTION
	)	FOR ORDER ALLOWING ENTRY OF
_____,	)	JUDGMENT ON AFFIDAVIT IN LIEU
Co-Petitioner.	)	OF HEARING
	)	

Motion

Based on ORS 107.095(4), petitioners request that this Court grant an Order allowing entry of judgment based on the attached Affidavit of co-petitioners, in lieu of a hearing.

Statement of Points and Authorities

In a suit for dissolution of marriage where the parties are co-petitioners, ORS 107.095(4) authorizes the Court to enter a judgment of dissolution upon the affidavit of the co-petitioners without a hearing.

DATED this_____ day of_____, 20___.

_____	_____
Co-Petitioner, Pro Se (signature)	Co-Petitioner, Pro Se (signature)
_____	_____
Print name	Print name
_____	_____
Contact Address	Contact Address
_____	_____
City, State, Zip code	City, State, Zip code
_____	_____
Contact Telephone	Contact Telephone

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:

☐ We selected this document for ourselves and completed it without paid assistance.

☐ We were provided this document by an attorney

☐ We paid or will pay money to_____for assistance in preparing this document.

_____ _____

Signature Signature

FORM 8

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

In the Matter of the Marriage of:	)	
	)	
_____,	)	Case No._____
Co-Petitioner,	)	
and	)	ORDER ALLOWING JUDGMENT ON
	)	AFFIDAVIT IN LIEU OF HEARING
_____,	)	
Co-Petitioner.	)	
	)	

Co-Petitioner's Motion for Order Allowing Judgment on Affidavit in Lieu of Hearing is:

☐ Allowed.

☐ Denied_____.

DATED this _____ day of _____, 20_____.

_____
Circuit Court Judge

_____
Print Name

FORM 9

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

In the Matter of the Marriage of:	)	
	)	
_____,	)	Case No._____
Co-Petitioner,	)	
and	)	CO-PETITIONER'S AFFIDAVIT
	)	SUPPORTING JUDGMENT
_____,	)	OF DISSOLUTION
Co-Petitioner.	)	

STATE OF_____	)	
	) ss.	
County of _____	)	

We,_____and_____, being first duly sworn, say: we are co-petitioners in this proceeding. We were married on_____
(date)
in the County of_____, State of_____. Irreconcilable differences between us have caused the irremediable breakdown of our marriage. ☐ Wife ☐ Husband was an Oregon resident continuously for more than six months immediately prior to commencement of this suit. ☐ No domestic relations suits involving this marriage are pending in any other court.

☐ There are_____child/ren of the marriage. ☐ The wife is pregnant with husband's child. The wife was cohabiting with the husband when the child was conceived. The expected date of the child's birth is_____.

☐ The wife is not now pregnant.

☐ Child/ren named_____ was/were born to the wife on the following dates:____Do not list. Provide by UTCR 2.130 CIF_____, during this marriage. The husband is

not the father of the child/ren. The wife was not cohabiting with the husband when the child/ren was/were conceived.

☐ The wife is pregnant at this time and the husband is not the father of this child. The wife was not cohabiting with the husband when this child was conceived. The expected date of the child's birth is_ _____.

This case is now ready for a hearing on the merits. We make this affidavit in support of a Judgment of Dissolution of Marriage without a hearing. The allegations in our Petition are true and it is just and reasonable that we be granted the relief requested.

☐ Child custody or child support is involved in this case:

CHILD CUSTODY JURISDICTION

Home State Jurisdiction:

☐ The child/ren have lived in Oregon for the last six months.

☐ The child/ren are not now living in Oregon, but have lived in Oregon for at least six consecutive months (at least part of which period occurred in the last six months), and a parent or acting parent continues to live in Oregon.

Significant Connection Jurisdiction:

☐ The child/ren and_____have significant connections to
(Name of parent or caretaker)
Oregon and substantial evidence about the child/ren's care, protection, training, and personal relationships is available here, **AND:**

☐ There is no 'home state' because the child/ren have not lived in any one state for six consecutive months, at least a part of which period occurred in the last six months; or

☐ The 'home state' has declined jurisdiction in favor of Oregon.

Temporary Emergency Jurisdiction:

☐ The child/ren are physically present in Oregon and have been abandoned or an emergency exists requiring the child/ren's protection because the child/ren, sibling(s), and/or parent are subjected to or threatened with mistreatment or abuse.

☐ There is not another child custody proceeding pending in a court of a state having jurisdiction under ORS 109.741 – 109.747. This Order based on Temporary Emergency Jurisdiction remains in effect until an Order is obtained from a Court of a state having 'home state' or 'significant connection' jurisdiction. If a child custody proceeding has not been or is not commenced in a court of a state having either 'home state' or 'significant connection' jurisdiction, this Order becomes a final determination if Oregon becomes the 'home state' of the child/ren.

☐ There is another child custody proceeding pending in a court of a state having jurisdiction under ORS 109.741 – 109.747. This Order based on Temporary Emergency Jurisdiction remains in effect until the_____day of_____,20____, or until an Order is obtained from the other state within that period.

☐ **Oregon does not have jurisdiction** under the Uniform Child Custody Jurisdiction Act because:_____

_____

The current residence of the minor child/ren is:

Name of Child	Resides with	For how long

☐ Child support is involved: Husband's gross monthly income is approximately $_____ Wife's gross monthly income is approximately $_____. The child support amount we have requested ☐ does not deviate from the amount presumed correct under Oregon Administrative Rules, or ☐ does deviate from the amount presumed correct of $ _____ because: _____

_____

_____

☐ There is an existing child support order, a copy of which is on file in the case. As of today's date, the back child support owed is _____. The next payment of _____

(Total amount not paid to date) (Monthly payment)

is due on _____ .

(Date due)

☐ Co-Petitioner/s, (*write name/s*) _____

has/have appropriate **private** health care coverage available for the parties'child/ren either through an employer, union, or other source, or through a domestic partner, spouse or other family member residing with them *(describe type of coverage)*: _____

_____

We request that ☐ Co-Petitioner, (*write name*) _____be ordered to maintain this coverage throughout the period of the support obligation for the benefit of the parties' child/ren.

☐ Both Co-Petitioners have appropriate **private** health care coverage available for the parties' child/ren. We select the following health care coverage to be maintained throughout the period of the support obligation: ☐ Co-Petitioner's, (*write name*) _____ ☐ Both Co-Petitioner's *(describe type/s of coverage)*: _____

_____

☐ Neither Co-Petitioner has appropriate **private** health care coverage available for the parties' child/ren and,

☐ Co-Petitioner, (*write name*) _____ ☐ Both Co-Petitioners should be ordered to apply for and enroll the child/ren in **public** health care coverage.

☐ Co-Petitioner, (*write name*) _____ has already applied to enroll the child/ren in **public** health care coverage. This coverage should be maintained if the child/ren are accepted for enrollment.

☐ The child/ren are currently enrolled in **public** health care coverage. This coverage should be maintained.

☐ Both Co-Petitioners should be ordered to provide appropriate **private** health care coverage when such coverage becomes available to them through any source.

☐ Cash medical support should be ordered because:

☐ Neither party has appropriate **private** health care coverage available for the child/ren.

☐ The party receiving cash child support is also the party providing **private** health care coverage.

The child support worksheet submitted with our judgment shows that cash medical support should be $_____ per month.

☐ Co-Petitioner _____ should pay, in addition to cash child support, cash medical support in the amount of $_____ per month.

☐ Cash medical support should not be ordered because:

☐ Co-Petitioner _____ □ Co-Petitioner

has income that is no more than full-time Oregon minimum wage or is/are eligible for Oregon public assistance.

☐ The parties should share the child/ren's uninsured medical expenses as described below.

☐ Cash medical support has already been ordered in another case.

☐ Other reasons: _____

☐ Co-Petitioner, (*write name*) _____ should pay _____% □ and

☐ Co-Petitioner, (*write name*) _____ should pay _____% of the uninsured HEALTH, ACCIDENT, DENTAL, ORTHODONTIC, AND OPTICAL HEALTH costs incurred by the child/ren. This obligation should be ☐ <u>in addition</u> to ☐ instead of any cash medical support.

☐ **Spousal support is involved in this case**.

☐ Husband ☐ Wife is entitled to transitional spousal support because:_____

_____

_____

☐ Husband ☐ Wife is entitled to compensatory spousal support based upon the following contribution to the education, training, vocational skills, career or earning capacity of the other party:____

_____

_____

☐ Husband ☐ Wife is entitled to spousal maintenance because:_____

_____

_____

_____	_____
Co-Petitioner, Pro se (signature)	Co-Petitioner, Pro se (signature)
_____	_____
Print name	Print name
_____	_____
Contact Address	Contact Address
_____	_____
City, State, Zip Code	City, State, Zip Code
_____	_____
Contact Telephone	Contact Telephone

SUBSCRIBED AND SWORN to before me this_____ day of_____,_____

by_____.

_____

Notary Public for_____/Court Clerk

My Commission Expires:_____

SUBSCRIBED AND SWORN to before me this_____ day of_____,_____

by_____.

_____

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:

☐ We selected this document for ourselves and completed it without paid assistance.

☐ We were provided this document by an attorney.

☐ We paid or will pay money to_____ for assistance in preparing this document.

_____	_____
Co-Petitioner, signature	Co-Petitioner, signature

FORM 10

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

In the Matter of the Marriage of:	)	
	)	
_____,	)	Case No._____
Co-Petitioner,	)	
and	)	GENERAL JUDGMENT OF DISSOLUTION
	)	OF MARRIAGE (With Children);
_____,	)	and MONEY AWARD
Co-Petitioner.	)	
☐_____,	)	
Child who is at least 18 and under 21 years	)	
Of age, unmarried and unemancipated.	)	
(ORS 107.108)	)	

IT APPEARING that the above named Petitioners filed their Petition for Dissolution with the Court on_____, 20___, and; IT APPEARING that the Petitioners have submitted a Motion and supporting Affidavit for Judgment and the court being fully advised; and

IT APPEARING that irreconcilable differences have caused the irremediable breakdown of this marriage.

THE COURT FOUND FURTHER THAT:

☐ Husband ☐ Wife has/have been a resident of and domiciled in the state of Oregon continuously for six months immediately prior to the filing of the Petition for Dissolution of Marriage.

CHILDREN OF THE MARRIAGE

The following child/ren was/were born to or adopted by the parties before or during this marriage:_____

☐ Husband is not the father, or paternity has not been established of wife's child/ren named_____

_____

born during the marriage on the following date(s):_____Do not list. Provide by UTCR 2.130 CIF._____

☐ Wife is not now pregnant.

☐ Wife is now pregnant. Husband ☐ is ☐ is not the father of the wife's child due_____
(insert date)

CHILD CUSTODY JURISDICTION

Home State Jurisdiction:

☐ The child/ren have lived in Oregon for the last six months.

☐ The child/ren are not now living in Oregon, but have lived in Oregon for at least six consecutive months (at least part of which period occurred in the last six months), and a parent or acting parent continues to live in Oregon.

Significant Connection Jurisdiction:

☐ The child/ren and_____have significant connections to
(Name of parent or caretaker)
Oregon and substantial evidence about the child/ren's care, protection, training, and personal relationships is available here, **AND:**

☐ There is no 'home state' because the child/ren have not lived in any one state for six consecutive months, at least a part of which period occurred in the last six months; or

☐ The 'home state' has declined jurisdiction in favor of Oregon.

Temporary Emergency Jurisdiction:

☐ The child/ren are physically present in Oregon and have been abandoned or an emergency exists requiring the child/ren's protection because the child/ren, sibling(s), and/or parent are subjected to or threatened with mistreatment or abuse.

☐ There is not another child custody proceeding pending in a court of a state having jurisdiction under ORS 109.741 – 109.747. This Order based on Temporary Emergency Jurisdiction remains in effect until an Order is obtained from a Court of a state having 'home state' or 'significant connection' jurisdiction. If a child custody proceeding has not been or is not commenced in a court of a state having

either 'home state' or 'significant connection' jurisdiction, this Order becomes a final determination if Oregon becomes the 'home state' of the child/ren.

☐ There is another child custody proceeding pending in a court of a state having jurisdiction under ORS 109.741 – 109.747. This Order based on Temporary Emergency Jurisdiction remains in effect until the_____day of_____,20____, or until an Order is obtained from the other state within that period.

☐ **Oregon does not have jurisdiction** under the Uniform Child Custody Jurisdiction Act because:_____

_____

_____

CHILD/REN WHO ARE AT LEAST 18 AND UNDER 21 YEARS OF AGE

_____(child/ren's name(s)) is at least 18 and under 21 years of age, us unmarried and unemancipated and has:

☐ Waived further appearance in these proceedings.

☐ Signed and stipulated to the terms of judgment evidenced by the signature below.

☐ Fully participated in the proceedings and the judgment effectively binds him/her to the terms.

NOW, THEREFORE, IT IS HEREBY ORDERED AND ADJUDGED:

The terms of this judgment are effective immediately. The marital status of the parties shall terminate on the date this judgment is signed by the judge.

PARENTING PLAN

Custody of the child/ren is awarded as follows:

☐ Wife is awarded legal custody of the following child/ren:_____

_____

☐ Husband is awarded legal custody of the following child/ren: _____

_____

☐ The parties are awarded joint legal custody of the following child/ren:_____

_____

☐ Husband ☐ Wife ☐ Both parties shall have reasonable parenting time with the child/ren.

☐ Specific parenting time should be as follows:_____

_____

_____

_____

_____

☐ See attached parenting plan, labeled "Exhibit 1."

☐ 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.

☐ Wife and Husband shall each provide contact addresses and contact telephone numbers to the other and notify each other of any emergency circumstances or substantial changes in the child/ren's health.

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 Human Resources 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 or civil court clerk for information.

NOTICE ABOUT PERIODIC REVIEW AND MODIFICATION OF CHILD SUPPORT ORDERS

If your child support case is handled by the District Attorney or the Division of Child Support Services (DCS), this agency will review your child support order if at least three years have passed since the order was entered, modified, or last reviewed. *This review will take place only if a parent requests*. The purpose of the review is to see if the amount ordered is still within the guidelines for child support set out in Oregon law. The review could result in an increase or decrease in the support amount, depending on the parents' financial circumstances and the needs of the child. This "periodic review" service is provided at no cost to parents, but is available only for cases handled by the District Attorney or DCS.

The support agency handling your case will also review your support order for compliance with the guidelines whenever a substantial change in circumstance has occurred. You can request this "change in circumstance" modification from the support agency. But *any* support order (not just orders handled by the District Attorney or DCS) can be modified because of a change in circumstance, so a private attorney is able to assist you with this, too. You may also represent yourself.

CHILD SUPPORT, INCLUDING CASH MEDICAL SUPPORT

Cash Child Support

Complete either (a) or (b) below:

(a) ☐ Cash child support must be paid by ☐ Co-Petitioner _____ to

☐ Co-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*) _____.

☐ The child support worksheet on which the support was calculated is labeled "Exhibit_____" and attached to and incorporated in this judgment.

(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: _____

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.

☐ Co-Petitioner _____ ☐ Both Co-Petitioners has/have appropriate private health care coverage available for the parties' child/ren through an employer, spouse, domestic partner or other source. ☐ Co-Petitioner _____ ☐ Both Co-Petitioner 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 above.

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

☐ Neither Co-Petitioner has appropriate private health care coverage available for the parties' child/ren. ☐ Co-Petitioner _____ ☐ Both Co-Petitioners 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 ☐ Co-Petitioner _____ must pay $_____ for cash medical support to ☐ Co-Petitioner _____ or ☐ Because neither parent has appropriate private health care coverage available for the parties'

child/ren: ☐ Co-Petitioner _____ must pay cash medical support in the monthly amount of $_____ to Co-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.

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

☐ Cash medical support has already been ordered in another case as described above.

☐ Other reason: _____

_____

(e) Responsibility for Uninsured Health Expenses.

After the custodial parent pays the first $250 per year per child, ☐ Co-Petitioner _____ _____ must pay _____% and ☐ Co-Petitioner _____ 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 section c as part of the child support order.

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)

Length of Child Support

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

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

☐ The support ordered in the paragraphs 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.

Payment of Child Support

☐ This order shall modify and replace the following existing order (*list court/agency and case number*): _____because the existing order was issued by an Oregon court or agency, one of the parents or the child/ren receiving support under the order still resides in Oregon, and circumstances have changed since the order was entered.

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 ☐ Co-Petitioner _____'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.

Dependents for Tax Purposes

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

_____

OR ☐ Other *(specify)*:_____

_____

NOTICE OF INCOME WITHHOLDING

This support order is enforceable by income withholding under state law. 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 oblige requests withholding for good cause. The District Attorney or, as appropriate, the Division of Child Support Services of the Department of Justice will assist in securing such withholding. Exceptions may apply in some circumstances.

LIFE INSURANCE COVERAGE FOR CHILDREN

☐ Husband ☐ Wife 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. This parent shall maintain coverage in an amount sufficient to provide, in the event of this parent's death, continued support at least at the level of and for the duration of the support obligation.

SPOUSAL SUPPORT AND LIFE INSURANCE

☐ No spousal support or spousal life insurance is ordered in this case.

TRANSITIONAL SPOUSAL SUPPORT

☐ Transitional support shall be paid by _____ to_____

Payments shall be made in the following manner:

☐ In monthly installments of $ _____, beginning on the first day of the month following the date of the judgment and continuing on the first day of each month thereafter until_____ (date); **or**

☐ In one payment of $_____, due on_____ (date).

☐ Other:_____

COMPENSATORY SPOUSAL SUPPORT

☐ Compensatory support shall be paid by _____ to_____

Payments shall be made in the following manner:

☐ In monthly installments of $ _____, beginning on the first day of the month following the date of the judgment and continuing on the first day of each month thereafter until_____ (date); **or**

☐ In one payment of $_____, due on_____ (date).

☐ Other:_____

SPOUSAL MAINTENANCE

☐ Spousal maintenance shall be paid by _____ to_____

Payments shall be made in the following manner:

☐ In monthly installments of $ _____, beginning on the first day of the month following the date of the judgment and continuing on the first day of each month thereafter until_____ (date); **or**

☐ In one payment of $_____, due on_____ (date).

☐ Other:_____

All payments of spousal support shall be made:

☐ To the Oregon Department of Justice, P.O. Box 14506, Salem, Oregon, 97309. Petitioners requests that collection, accounting, disbursement and enforcement services be provided by the State of Oregon's Department of Justice; **or**

☐ Directly into _____'s checking or savings account. A receipt of deposit should be kept by the paying spouse as proof of payment. The spouse receiving support should

provide the paying spouse with current deposit slips and/or bank name, account name, and account number.

☐ If child support is also ordered in this case and if enforcement services are provided through the State of Oregon's Department of Human Resources, the spousal support order should be enforceable by income withholding under ORS 25.311.

☐ Husband ☐ Wife shall obtain and maintain life insurance for the benefit of the ☐ Husband ☐ Wife throughout the period of the support obligation. The paying spouse should maintain coverage in an amount sufficient to provide, in the event of the paying spouse's death, continued support at least at the level of and for the duration of the support obligation.

REAL PROPERTY DISTRIBUTION

☐ Neither wife nor husband has any interest in any real property located in this or any other state.

☐ Husband ☐ Wife ☐ both Husband and wife has/have an interest in real property located at the address of:_____

_____

☐ This property shall be distributed as follows:_____

_____

_____

_____

☐ The legal description of the real property is attached as Exhibit_____ and incorporated in this judgment. ☐ Husband ☐ Wife shall be responsible for the preparation, signing and recording of a deed, transferring the real property as required by this judgment.

☐ Distribution of this property is not within the jurisdiction of this court.

PERSONAL PROPERTY DISTRIBUTION

☐ The wife and husband have divided between them all personal effects, household goods, and other personal property they own separately or together, and each shall be awarded those items now in their possession.

☐ The wife is awarded the following personal property:_____

_____

_____

_____

☐ The wife is awarded her retirement benefits, pension plan, profit-sharing plan, deferred-compensation plan, and/or stock option plan held by wife's employer, free of any interest in the husband.

☐ The husband is awarded the following personal property:_____

_____

_____

_____

☐ The husband is awarded his retirement benefits, pension plan, profit-sharing plan, deferred-compensation plan, and/or stock option plan held by husband's employer, free of any interest in the wife.

☐ Additional page attached; see section labeled "Personal Property Distribution Continued."

DISTRIBUTION OF DEBTS

Each party shall be responsible for the payment of all debts incurred by him or her individually since the date of the separation; all debts which are distributed to him or her by the court; and all debts which are secured by property distributed to that party. Also, if any creditor asks the spouse not responsible for a debt to pay all or a portion of it, and he or she does so, the spouse responsible for that debt shall reimburse the other spouse for any monies he/she paid to the creditor after the date this judgment was entered.

The date of separation *(when you began living apart)* was:_____

☐ There are no outstanding debts of this marriage.

☐ Husband shall pay the debts listed below.

Name of Creditor	What debt is for	Amount

☐ Wife shall pay the debts listed below.

Name of Creditor	What debt is for	Amount

☐ Additional page attached; see section labeled "Debt Distribution Continued."

Within 30 days of the date of this judgment, each party should execute, acknowledge, and deliver whatever documents are necessary to accomplish the distribution of debts and property ordered by the court.

FORMER NAME

☐ Wife's ☐ Husband's former name of _____is restored.

COURT COSTS AND FEES

(a) If Court Costs and Fees were Deferred: (please check the boxes below that apply)

☐ Husband ☐ Wife shall be liable for ☐ one-half ☐ all the court costs and service fees that were deferred.

☐ The State of Oregon shall have judgment against ☐ Husband ☐ Wife for ☐ one-half ☐ all of the court costs.

☐ The county of _____ shall have judgment against ☐ Husband ☐ Wife for ☐ one-half ☐ all of the service fees.

(b) If Court Costs and Fees were Paid by the Parties: (please check the boxes below that apply)

☐ Husband ☐ Wife shall be liable for ☐ one-half ☐ all the court costs and service fees that have been paid in this suit and judgment shall be entered accordingly.

REQUIRED INFORMATION ABOUT THE PARTIES

Wife	**Husband**
Full name:_____	Full name:_____
Contact address:_____	Contact address:_____
_____	_____
_____	_____
Soc. Sec. no.: Do not list. Provide by UTCR 2.130 CIF	Soc. Sec. no.: Do not list. Provide by UTCR 2.130 CIF
Driver's license no.: Provide by UTCR 2.130 CIF	Driver's license no.: Provide by UTCR 2.130 CIF
Employer name : Provide by UTCR 2.130 CIF	Employer name : Provide by UTCR 2.130 CIF
Employer address: Provide by UTCR 2.130 CIF	Employer address: Provide by UTCR 2.130 CIF
Employer tel. no.: Provide by UTCR 2.130 CIF	Employer tel. no.: Provide by UTCR 2.130 CIF

Both parties shall inform the Court and the Department of Justice (P.O. Box 14506, Salem, Oregon 97309) in writing of any change in the information required by this section within ten (10) days of such change, unless a finding of unreasonable risk has been made in this case.

If the court has ordered that a party be allowed not to disclose information by means of this Judgment, the Department of Justice shall not disclose the information in the preceding section to the other party.

OTHER INFORMATION ABOUT THE PARTIES

Wife	**Husband**
Date of birth: Provide by UTCR 2.130 Age:_____	Date of birth: Provide by UTCR 2.130 Age:_____
All former legal names: Provide by UTCR 2.130 CIF	All former legal names: Provide by UTCR 2.130 CIF
Date of marriage:_____	Place of marriage:_____

There are_____children of the parties, whose names, ages and dates of birth are:

Name	Age	Expected/Date of Birth
		Provide by UTCR 2.130 CIF
		Provide by UTCR 2.130 CIF
		Provide by UTCR 2.130 CIF
		Provide by UTCR 2.130 CIF

MONEY AWARD

(Child Support Obligation ☐ included ☐ not included)

ADDITIONAL INFORMATION REQUIRED BY ORS 18.042

Wife	**Husband**
Full name:_____	Full name:_____
Contact address:_____	Contact address:_____
_____	_____
Year of birth:_____	Year of birth:_____
Last Four Digits of Drivers License Number and	Last Four Digits of Drivers License Number and
State of Issuance:_____	State of Issuance:_____
Last Four Digits of the Support Obligor's Social	Last Four Digits of the Support Obligor's Social
Security Number:_____	Security Number:_____
Attorney's name/number:_____	Attorney's name/number:_____
_____	_____

A. CHILD SUPPORT
   1. Judgment Creditor_____
   2. Attorney for Judgment Creditor_____

3. Judgment Debtor_____
4. Amount of Judgment representing back child support:_____
5. Amount of Judgment:_____ per month, starting the first day of the month following the date of the judgment.
6. ☐ Of this Child Support Award, $_____ constitutes "cash medical support"
7. Interest
   a. Interest accrues at 9% per annum, simple interest.
   b. Interest accrues on the judgment on each unpaid installment as it becomes due on the first day of each month.

B. SPOUSAL SUPPORT
1. Judgment Creditor_____
2. Attorney for Judgment Creditor_____
3. Judgment Debtor_____
4. Amount of Judgment:_____ per month, starting the first day of the month following the date of the judgment, and terminating after the payment due on_____.
5. Interest
   a. Interest accrues at 9% per annum, simple interest.
   b. Interest accrues on the judgment on each unpaid installment as it becomes due on the first day of each month.
6. Spousal support payments are taxable to the obligee spouse and deductible to the obligor spouse. All payments terminate upon the death of either party.

C. PROPERTY AND DEBT DIVISION (Judgments against Husband)
1. Judgment Creditor_____
2. Attorney for Judgment Creditor_____
3. Judgment Debtor_____
4. Amount of Judgment_____
5. Interest
   a. Interest accrues at 9% per annum, simple interest.
   b. Date from which interest runs: date judgment is entered.

D. PROPERTY AND DEBT DIVISION (Judgments against Wife)
1. Judgment Creditor_____
2. Attorney for Judgment Creditor_____
3. Judgment Debtor_____
4. Amount of Judgment_____
5. Interest

a. Interest accrues at 9% per annum, simple interest.
b. Date from which interest runs: date judgment is entered.

E. COURT COSTS (i.e., filing fees, hearing fees, trial fees)
1. Judgment Creditor_____
2. Attorney for Judgment Creditor_____
3. Judgment Debtor_____
4. Amount of Judgment_____
5. Interest
   a. Interest accrues at 9% per annum, simple interest.
   b. Date from which interest runs: date judgment is entered.

F. SERVICE FEES
1. Judgment Creditor_____
2. Attorney for Judgment Creditor_____
3. Judgment Debtor_____
4. Amount of Judgment_____
5. Interest
   a. Interest accrues at 9% per annum, simple interest.
   b. Date from which interest runs: date judgment is entered.

DATED this _____ day of _____, 20___.

_____

Circuit Judge_____

APPLICATION FOR CHILD SUPPORT SERVICES: By signing below, I apply for child support services from the Child Support Program (CSP). (Note: If you never received TANF, Tribal TANF or AFDC in any state, an annual $25 fee will apply if over $500.00 is collected and distributed to the family each year.

_____ _____

Co-Petitioner, Pro se (signature) Date

_____ _____

Co-Petitioner, Pro se (signature) Date

Both parties have agreed to the terms of this judgment:

_____	_____
Co-Petitioner, Pro Se (signature)	Co-Petitioner, Pro Se (signature)
_____	_____
Print Name	Print Name
_____	_____
Contact Address	Contact Address
_____	_____
City, State, Zip code	City, State, Zip code
_____	_____
Contact telephone	Contact telephone

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

_____

Child, signature

STATE OF_____)
) ss.
County of_____)

SUBSCRIBED AND SWORN to before me this _____ day of_____, 20____ by_____.

_____

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. I certify that: *(check all that apply)*

☐ We selected this document for ourselves and completed it without paid assistance.

☐ We were provided this document by an attorney.

☐ We paid or will pay money to_____ for assistance in preparing this document.

_____	_____
Signature	Signature

Oregon Health Authority
PUBLIC HEALTH DIVISION
Center for Health Statistics

RECORD OF DISSOLUTION OF MARRIAGE, ANNULMENT OR REGISTERED DOMESTIC PARTNERSHIP

136-

State file number:

The petitioner or legal representative of the petitioner is responsible for completing the personal information on this form and shall present this form to the clerk of the court with the petition. In all cases the completed record shall be a prerequisite to the granting of the final judgment.

Case number:_____

Judgment type: ☐ Dissolution of marriage ☐ Annulment ☐ Dissolution of registered domestic partnership(RDP)

Husband / Partner A

1. Husband/Partner A – Legal name: *(first, middle, last, suffix)*
2. Last name at birth: *(not required for RDP)*
3. Residence or legal address: *(street and number)* *(city or town)* *(county)* *(state)*
4. Other legal last names used:
5. Date of birth: *(mm/dd/yyyy)*
6. Birthplace: *(state, territory or foreign country)*

Wife / Partner B

7. Wife/Partner B – Legal name: *(first, middle, last, suffix)*
8. Last name at birth: *(not required for RDP)*
9. Residence or legal address: *(street and number)* *(city or town)* *(county)* *(state)*
10. Other legal last names used:
11. Date of birth: *(mm/dd/yyyy)*
12. Birthplace: *(state, territory or foreign country)*

Marriage / Declaration

13. Date of marriage / filing of RDP declaration: *(mm/dd/yyyy)*
14. Date couple last resided in same household: *(mm/dd/yyyy)*

15a. Place of marriage/RDP: *(city, town or location)*
15b. County:
15c. State or foreign country:

16. Number of children under 18 in this household as of the date in item 14:
Number:_____ ☐ None

17. Petitioner:
☐ Husband/Partner A ☐ Wife/Partner B ☐ Both

Attorney

18a. Name of petitioner's attorney: *(print)*
18b. Address: *(street and number or rural route number, city or town, state, ZIP code)*

19a. Name of respondent's attorney: *(print)*
19b. Address: *(street and number or rural route number, city or town, state, ZIP code)*

Judgment

20. Marriage/RDP declaration of the above named persons was dissolved on: *(mm/dd/yyyy)*
21. Date judgment becomes effective: *(mm/dd/yyyy)*
22. Number of children under 18 whose physical custody was awarded to:
____ Husband/Partner A ____ Wife/Partner B ____ Joint (shared custody) ____ Other *(specify)*_____ ☐ No children
23. County of decree:
24. Title of court:
Circuit
25. Signature of court official:
➡
26. Title of court official:
27. Date signed: *(mm/dd/yyyy)*

Information below will not appear on the certified copies of the record.

28. Husband's Social Security number: *(not required for RDP)*
29. Wife's Social Security number: *(not required for RDP)*

	30. Number of this marriage/RDP – first, second, etc.:		31. If previously married or in a RDP date last marriage/RDP ended:		32. Hispanic origin: Cuban, Mexican, Puerto Rican	33. Race(s): Black, White, etc.	34. Education – Specify only highest grade completed:	
	Marriage	RDP	By death, divorce, dissolution or annulment *(specify below)*	Date: *(mm/dd/yyyy)*	List all that apply *(specify below)*	List all that apply *(specify below)*	Elementary/Secondary: *(grades 0-12)*	College: *(1-4 or 5+)*
Husband / Partner A	30a.	30b.	31a.	31b.	32a.	33a.	34a.	34b.
Wife / Partner B	30c.	30d.	31c.	31d.	32b.	33b.	34c.	34d.