Form 5
IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF LINN

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	☐ **PETITIONER** ☐ **RESPONDENT**
	)	**CERTIFICATE OF MAILING**
	)	**TO THE DIVISION OF CHILD**
_____,	)	**SUPPORT**
Respondent.	)	

I certify that on _____, 20_____, I mailed a true copy of the Motion, Affidavit and Order to Show Cause re: Modification in the above case to the local branch office of the Department of Justice, Division of Child Support at:

Division of Child Support
Albany Office
1245 Clay Street SE
Albany, OR 97322.

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

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

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

DATED this _____ day of _____, 20_____.

_____
☐ Petitioner ☐Respondent, Signature

_____
Print Name

_____
Contact Address

_____
City, State, Zip Code

_____
Contact Telephone