

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

IN THE MATTER OF)
 THE MARRIAGE OF)
 SEPARATION OF)
 CUSTODY OF)
_____,)
)
Petitioner,)
and)
)
_____,)
Respondent.)

Case No. _____

ORDER FOR TEMPORARY RELIEF
SLR 8.005

1. This matter came before the Court:

- a. On the motion and affidavit of Petitioner / Respondent, the default of Petitioner / Respondent having been found.
- b. On the motion and affidavit of Petitioner / Respondent; Petitioner / Respondent having filed a Waiver of Further Appearance.
- c. On the stipulations of the parties, as shown by the signatures below.
- d. At a hearing held _____, at which the following persons were present:
(Date)
- Petitioner Petitioner's attorney Respondent Respondent's attorney
- e. The Court issued an opinion letter dated _____ (date), a copy of which is attached as Exhibit A.

IT IS THEREFORE ORDERED that:

1. Custody:

- a. Petitioner Respondent is awarded **sole custody** of the child/ren _____

(Full Names and dates of birth)
- The parties have agreed to joint custody of the following child/ren:

b. Physical custody of the child(ren) named below to:

- Petitioner _____
- Respondent _____
- Joint _____

Parenting Time:

- Petitioner Respondent shall have parenting time with the child/ren in accordance with the attached **Standard Linn County Parenting Plan**, or the **attached parenting plan, labeled "Exhibit 1"**.

OR

Petitioner Respondent shall have reasonable parenting time with the child/ren upon giving reasonable notice to the other parent. Minimum parenting time, in case of disagreement, shall be:

- Additional page(s) attached, labeled "Exhibit 1 ."
- Petitioner Respondent shall not have parenting time because this would endanger the health and safety of the child/ren.
- Parenting time shall be supervised by _____.
- Any cost of the supervision shall be paid by Petitioner Respondent Other: _____
- Petitioner and Respondent 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.

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

2. **Debts:** Minimum monthly payments of debts required to pay during the pendency of this case are as follows:

Name of Creditor (who debt is owed to)	What debt is for	Amount	Who should pay (Husband or Wife)

Debt Maintenance: Each party shall make minimum monthly payments on and keep current the following marital debt until further order of the court:

Petitioner: _____.

Respondent: _____.

Additional page(s) attached, labeled "Exhibit _____"

3. Petitioner Respondent shall be granted _____

4. **Medical Support:**
See finding and order under "Insurance below"

Findings of fact required by ORS 25.323(3)- see findings in attached judge's decision letter, incorporated herein. [A cap of 7% of gross income applies to Medical Support expenses ordered.]

- 5. **Insurance:** The parties shall maintain any existing health, dental, vision, disability and or life insurance currently in force for the benefit of the other party and or the children until further order of the court. Each party shall pay one half of all uninsured medical and dental expenses exceeding the first \$250 per child per year incurred.
- 6. **Restraint:** Each party is restrained from disposing of or wasting marital assets. Each party shall maintain all existing health, dental, optical, property, auto and life insurance policies in full force until further order of the court.
- 7. **Exclusive Use:** The parties are awarded exclusive use and possession of the following property until further order of the court:
 To Petitioner: _____
 To Respondent: _____

DATED this _____ day of _____, 20_____.

Circuit Court Judge

Print Name

Both parties have agreed (stipulated) to the terms of this Order: (both parties must sign below)

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

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

Submitted by:

<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent Signature	Print Name	Date
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Contact Address	City, State, Zip	Telephone
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I certify that this is a true copy:

 Petitioner Respondent, Signature