

FORM 7A
 IN THE CIRCUIT COURT OF THE STATE OF OREGON
 FOR THE COUNTY OF LINN

)	
)	
Petitioner,)	Case No. _____
and)	
)	
)	CERTIFICATE RE: PENDING CHILD
Respondent.)	SUPPORT PROCEEDINGS and/or
)	EXISTING CHILD SUPPORT
)	ORDERS/JUDGMENTS
)	(UTCR 8.090)

I hereby certify that:

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

- There is no pending child support proceeding in this or any other state involving the parties' child[ren].
- There is a pending child support proceeding in Oregon in another state which involves the parties' child[ren] as follows:

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

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

- There are no other child support orders/judgments in this or any other state involving the parties' child[ren].
- There is/are other child support orders/judgments involving the parties' child[ren], as follows:

ORDER/JUDGMENT #1 *(Attach a copy of the order)*

Name/County of Court or Agency where issued: _____
 Case Number: _____
 Date of Order: _____

ORDER/JUDGMENT #2 *(Attach a copy of the order):*

Name/County of Court or Agency where issued: _____
 Case Number: _____
 Date of Order: _____

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

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

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

DATED this ____ day of _____, 20____.

<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent, Signature	Print Name
Contact Address	Telephone or Contact Telephone