

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

Case No: _____

Petitioner

and

Respondent

**RESPONSE TO PETITION
FOR CUSTODY AND
PARENTING TIME
AND CHILD SUPPORT**

and counterclaims

Claim is not subject to mandatory arbitration

and

Unmarried children 18, 19, or 20 years old (per ORS 107.108) (*full names*)

➤ I need an interpreter: Spanish Russian other: _____

1. I, Respondent, appear and oppose the *Petition*. List sections opposed and reasons:

Section Number	Explain

Additional page attached titled "Section 1"

2. I make the following counterclaims:

(see Instructions for information about counterclaims including retirement benefits and support for a child, spouse, or partner)

<i>a</i>	
<i>b</i>	
<i>c</i>	
<i>d</i>	

Additional page attached titled "Section 2"

3. I should be allowed to move more than 60 miles farther away from Petitioner without written notice to Petitioner or the court (*explain*): _____

Additional page attached titled "Section 3"

4. Child Support Offsets

Social Security or apportioned veteran's benefits are paid to (or on behalf of) some or all of the children named in the *Petition* as a result of my disability or retirement and I request that child support be reduced dollar-for-dollar. The amounts per child are included in the

attached *Uniform Support Declaration*.

Survivors' and Dependents' Educational Assistance under 38 USC chapter 35 is paid to (or on behalf of) some or all of the children named in the *Petition* as a result of my disability or retirement, and child support must be reduced dollar-for-dollar. The amounts per child are included in the attached *Uniform Support Declaration*.

5. (Optional) Exception to Income Withholding of Child Support: I understand that payments will be made by income withholding unless an exception applies

I request an exception to the income withholding requirement of ORS 25.378 so that payment can be made another way because good cause exists

Petitioner and Respondent have agreed in writing to the following alternative payment method: _____

Other exception under ORS 25.396 (*explain*): _____

6. Information Required by the Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)

List the places where the minor children of the parties have lived in the last five years and the names of the people they lived with at that time

Dates (from/to)	County, State	Name of Parent/Caretaker	Contact Address of Parent/Caretaker	Which Children

Additional page attached titled "Section 6"

I have not participated in any litigation concerning custody, visitation, parenting time or placement of the children in this or any other state.

or

I have participated in the following litigation:

Name of Court	State	Case No.	Date	Result

Additional page attached titled "Section 6"

I do not know of any other domestic violence, custody, parenting time, or placement proceeding involving the children, or of any other court case which could affect this case, pending in any state

except: _____

(identify court, case number and kind of proceeding)

I do not know any person other than Petitioner who has physical custody of the children or who claims to have custody, visitation, or parenting time rights

except: _____
(list name and address)

Certificate of Document Preparation. Check all that apply:

- I chose this form for myself and completed it without paid help
 A legal help organization helped me choose or complete this form, but I did not pay money to anyone
 I paid (or will pay) _____ for help choosing, completing, or reviewing this form
 Guide & File selected and completed this form and I did not pay anyone to review the completed form

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

Date

Respondent (signature)

Respondent Name

Contact Address

City, State, Zip

Contact Phone

Certificate of Mailing

I certify that on (date): _____ I placed a true and complete copy of this
Response in the United States mail to Petitioner at (petitioner's address): _____

Date

Respondent (signature)

Respondent Name