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

In the Matter of ☐ the Marriage of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	SUPPLEMENTAL JUDGMENT RE:
	)	ENFORCEMENT OF PARENTING PLAN
_____,	)	
Respondent.	)	

This matter came before the Court:

☐ At the request of _____ for an order granting the relief requested in the Order to Show Cause dated _____.

☐ On the stipulations of the parties, as shown by the signatures below.

☐ At a hearing held _____, at which the following persons were present:
(date)

☐ Petitioner ☐ Petitioner's attorney, _____

☐ Respondent ☐ Respondent's attorney, _____

The Court considered the:

☐ Affidavit

☐ Affidavit and stipulations

☐ Evidence presented

and found that:

☐ Oregon has jurisdiction under the Uniform Child Custody Jurisdiction and Enforcement Act over the parenting time issue because

☐ _____County Circuit Court made the initial child custody determination.

☐ Other: _____

☐ Oregon does not have jurisdiction over the parenting time issue because: _____
_____
_____
_____
_____

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NOW, THEREFORE, IT IS HEREBY ORDERED:

☐ The parenting plan currently in effect shall be modified in accordance with the following:

_____
_____
_____
_____
_____

☐ _____ shall be required to attend the following counseling or education sessions: _____

☐ Spousal support shall be __ terminated ___ suspended ___ modified as follows:_____
_____
_____
_____
_____

☐ Child support shall be ___ terminated ___ suspended ___modified as follows:
_____
_____
_____
_____

☐ _____ shall be required to post bond or security as follows:
_____
_____
_____
_____

☐ The requested relief is denied.

☐ Other: _____
_____
_____
_____
_____

☐ Petitioner (or) ☐ Respondent shall be awarded ☐ reasonable attorney fees, ☐ filing fees, ☐ court costs, ☐ service fees, ☐ other: _____ incurred in enforcing the parenting plan *(see also provisions for court costs and fees below).*

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

☐ Petitioner (or) ☐ Respondent shall be liable for all the filing fees, court costs, service fees ☐ other: _____ that were deferred.

☐ Petitioner (or) ☐ Respondent shall each be liable for one half the filing fees, court costs, service fees ☐ other: _____ that were deferred.

☐ The State of Oregon shall have judgment against ☐ Petitioner ☐ Respondent for ☐ one-half ☐ all the filing fees, court costs, service fees ☐ other: _____ that were deferred.

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

☐ Petitioner ☐ Respondent shall be liable for ☐ one-half ☐ all the filing fees, court costs, service fees, other: _____ that have been paid in this suit, and judgment shall be entered accordingly.

Information Required by ORS 25.020 and ORS 107.085.

☐ Based on a finding that the health, safety, or liberty of ☐ Petitioner ☐ Respondent or a child, _____, would unreasonably be put at risk by disclosure of the following information, ☐ Petitioner ☐ Respondent has been allowed not to disclose this information.

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 below information required by ORS 25.020 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, the Department of Justice or the District Attorney shall not disclose the information in the following section to the other parent.

☐ Otherwise:

	Petitioner	Respondent
Full Name		
Former Legal Name(s)	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).
Age		
Address or Contact Address		
Telephone Number		
Social Security Number	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).
Driver License Number	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).
Employer Name	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).
Employer Address	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).

Employer Telephone	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).	Do not list here. List the information on the UTCR 2.130 Confidential Information Form (CIF).

☐ Additional page labeled "Required Information continued" attached.

Date of marriage/domestic partnership: _____.
Place of marriage/domestic partnership: _____.

Money Award. Child Support Obligation ☐ included ☐ not included.

	JUDGMENT CREDITOR (This is the party receiving payment from Judgment Debtor) ☐ **Petitioner** ☐ **Respondent**	**JUDGMENT DEBTOR (This is the party required to pay Judgment Creditor)** ☐ **Petitioner** ☐ **Respondent**
Full Name		
Address or Contact Address		
Attorney's Name, Telephone Number and Address		
The following information is required ONLY for the party designated as the "Judgment Debtor" above.		
Year of Birth		
Last Four Digits of Social Security Number		
Last Four Digits of Driver License Number and State of Issuance		
The following information is to be provided by the party designated as the "Judgment Creditor" above.		
Others Entitled to Portions of Judgment	The following person(s) or public bod(ies) are known by judgment creditor to be entitled to a portion of a payment made on the judgment (other than the judgment creditor's attorney): ☐ None or ☐ _____ _____ _____	

Type of Judgment	JUDGMENT CREDITOR (This is the party receiving payment from Judgment Debtor) □ Petitioner □ Respondent	JUDGMENT DEBTOR (This is the party required to pay Judgment Creditor) □ Petitioner □ Respondent	Amount of Judgment
Child Support Award			1. $_____ ☐ per month or ☐ Other: _____, starting on the ☐ first day or ☐ Other: _____ of the month following the date of the judgment
Spousal Support Award			1. $_____ ☐ per month or ☐ Other: ___ , starting on the ☐ first day or ☐ Other: _____ of the month following the date of the judgment, lasting until _____ (date), or the death of either party, whichever comes first; or 2. A lump sum payment of $__ to be paid by (date): _____
Prejudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.)			$_____
Postjudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.)			_____ percent (__%) per annum simple interest on the total judgment amount(s) of $_____. Interest begins accruing on the date the judgment is entered until fully paid.

Accrued Arrears (if any, on judgments to be paid on a periodic basis)			1. $_____ per month, starting on the ☐ first day or ☐ Other: _____ of the month following the date of the judgment until the total amount of $_____ is paid in full; or 2. A lump sum payment of $__ to be paid by: _____ (date).
Costs and Service Expenses (e.g., filing fees, hearing fees, trial fees, process fees)			$_____
Attorneys Fees (if any)			$_____

DATED this _____ day of _____, 20_____.

_____
Circuit Court Judge

_____
Print Name

☐ Both parties have agreed to the terms of this judgment (sign only your name):

_____
Petitioner (signature)

_____
Respondent (signature)

_____
Date

_____
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 document.

DATED this _____ day of _____, 20_____.

_____
☐ Petitioner ☐ Respondent, Signature

Submitted by:

_____
☐ Petitioner ☐ Respondent, Signature Print Name

_____
Address or Contact Address City, State, Zip Telephone or Contact Telephone

I certify that this is a true copy: _____
☐ Petitioner ☐ Respondent, Signature