Unmarried Parents:
Custody, Parenting Time, Child Support Process for Petitioners
Instructions for Packet 3A

Notice about these instructions and forms.

These instructions are not a complete statement of the law. They cover basic procedures for custody, parenting time and child support for unmarried parents. For legal information, please talk to a lawyer or visit your local law library. Each court has local rules, programs and procedures that may not be explained in these instructions. ***Information about how to contact your local court may be found at the Oregon Judicial Department website: http://courts.oregon.gov.***

This packet will allow you to ask the court for custody, parenting time or child support. **Paternity (who the father of the child is) must be established before you can use these forms.** Paternity may be established if the father signs and files a Voluntary Acknowledgment of Paternity (a statement that says he is the father) with the State Registrar of Vital Statistics. Paternity may also be established through the Oregon Child Support Program or through the courts. You may request that the Oregon Child Support Program establish paternity by filling out an Application for Support Enforcement Services, and sending it to the address stated on the form. You will be charged a $1 fee for this service. You may also download the Application form from the Division of Child Support's website: *http://www.dcs.state.or.us/forms*.

These instructions are broken down into three basic steps. The forms that go with each step are listed below.

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When filling out the forms, follow these directions:

• You are the named "petitioner" on all court forms and the other parent is the "respondent." Use full names (first, middle or middle initial, last) and print the names the same on all forms.

• The clerk will give you a case number when you file your papers. Make sure to put this on all copies and originals.

• Some forms have to be notarized or signed in the presence of a court clerk or a notary public. You will need your picture ID for this. Many banks provide notary services.

• Many forms say on the bottom, "I certify that this is a true copy," and provide a place to sign. Don't sign this line on the original form or on your own copy. You need to sign this line only on the copies that are served on the respondent.

• Make yourself a copy of any document you are filing with the court. File the original with the court clerk.

• Keep the court informed of your current address so you get notice of all court dates. **You are not required to use your residential address on any court form.** You may use a contact address where you regularly check in. **Your contact address will become public information.** Please make sure that you use an address that is ok for other people, including the respondent, to know. It must be an address in the state where you live where you can receive mail. If you use a contact address, the court will assume that you will receive all notices sent to that address. **Note: If you fear for your safety, you may be able to obtain a non-disclosure order.** Consult with your local court for instructions as well as the appropriate forms.

STEP 1: STARTING YOUR CASE

Legal Issues to Consider.

This type of case starts with a "petition" which lists the items you are asking the court to order in the "judgment." The judgment is the document that finalizes your case, and contains your rights and responsibilities. Oregon law provides that a number of issues must be addressed in the judgment. Before you fill out the petition, you should think about how you want to handle these issues.

Parenting Plan. A parenting plan is required for cases involving a minor child. The plan sets out the schedule and rules for each parent's time with the child. The parenting plan may include safety provisions for the child if domestic violence, substance abuse, child abuse or other circumstances are involved in your case.

A mediator can help parents create a parenting plan. Information about parenting plans may also be available through your court's parent education program, the courthouse facilitator, or your local law library. **The Oregon Judicial Department and the State Family Law Advisory Committee have created a "*Basic Parenting Plan Guide for Parents*" with information about how to develop a plan, information about alternative schedules, and ages and stages of your child[ren] which should be considered in creating a plan. A sample parenting plan form is included in the *Guide*. The *Guide* may be downloaded from the OJD Family Law Website at *http://www.courts.oregon.gov/familylaw*. There is also a "Safety Focused Parenting Plan Guide" on this website to help you develop a parenting plan where there are safety concerns for your children.**

If the parents don't agree on a parenting plan, a judge will order a parenting plan for you.

Oregon law (ORS 107.159) prevents either parent from moving more than 60 additional miles away from the other parent without giving him or her and the court notice of the move. You may ask the judge to waive this requirement by checking the last box in the parenting plan section of the petition.

For information about child custody, you may call Tel-Law (1-800-452-4776) tape 902, or visit *www.osbar.org*.

Child Support. IMPORTANT! Oregon law requires that the petitioning party submit a CERTIFICATE stating whether there are any pending child support proceedings or existing child support orders involving the parties' child[ren]. To comply with this requirement, fill out and submit the form called "CERTIFICATE re: PENDING CHILD SUPPORT PROCEEDINGS and/or EXISTING CHILD SUPPORT ORDERS/JUDGMENTS" in this packet. You will be required to attach certified copies of any pre-existing child support orders (certified copies may be obtained from the clerk of the issuing court).

In most cases, the court will order child support if the parties have a child and no child support order already exists. The amount of support, if ordered, will be determined by the Child Support Guidelines. The Guidelines have worksheets to help you figure out who should pay support and how much it should be. Support is typically withheld from wages unless an exception is allowed for direct deposit to the other parent's checking or savings account, or, if support enforcement services are being provided to either parent, as an "electronic payment withdrawal (EPW) or electronic funds transfer (EFT)" to a Department of Justice account. (EPW and EFT are procedures whereby funds are automatically withdrawn from a checking/savings account as authorized by the account holder.) Information about child support, including the Guidelines and Worksheets, is on the Internet at: *http://www.dcs.state.or.us/oregon_admin_rules/guidelines.htm*. This website also has a Child Support Calculator which may help you to calculate the amount of child support which should be paid: *http://www.dcs.state.or.us/calculator*. Your local court facilitator, legal aid office or child support program **may** also be able to help you calculate the amount of support.

Cash Medical Support. In addition to cash child support, Oregon law may require the payment of cash medical support. If neither party has private health insurance for the child(ren) or if the health insurance is to be provided only by the parent that receives cash child support, the court is required to order cash medical support unless the court finds there are reasons not to order it. The purpose of cash medical support is to help defray the cost of health insurance and the cost of uninsured medical expenses. The judge cannot order you or the other party to pay cash medical support if you or the other party has a dependent child in the household who is eligible to receive public medical assistance or if you or the other party is eligible for public medical assistance yourselves. A party who makes no more than Oregon minimum wage cannot be ordered to pay cash medical support

Oregon law requires the court to make sure that payment for the child(ren)'s uninsured medical expenses are addressed in the judgment. Although you may request that each party share the out-of-pocket medical expenses that exceed $250.00 per child per year, it may not be appropriate to request both the payment of cash medical support and the sharing of uninsured medical expenses. That is because one of the purposes of cash medical support is to help pay for the cost of uninsured medical expenses.

Unmarried and Unemancipated Children at Least 18 and Under 21 Years of Age. The 2005 Legislative Assembly amended Oregon law regarding unmarried unemancipated children who are at least 18 and under 21 years of age. The new law says that these children are necessary parties to all family law cases involving support. The Petition forms that deal with support will have a line to write in the child's name, including them in the heading. The Judgment forms will have a place indicating how the child has been involved in the case, and if applicable, a place to sign underneath Petitioner and Respondent signatures agreeing to the judgment. As a party to the case, these children must be legally served with all the required documents. After they are served, children **may** sign a Waiver of Further Appearance and Consent to Entry of Judgment form found in Packet 6J if the child does not choose to participate further in the case.

Insurance. Oregon law requires that the judgment address the issue of health insurance for any minor child involved in your case, and for payment of uninsured medical expenses. It also must provide for security for the payment of support, such as life insurance. In the health care coverage section, you must mark any of the options that apply to your family's situation. There are two major categories involved in determining health care coverage for the children: private, such as insurance available through employment, and public, such as the Oregon Health Plan.

If either you or the other parent, or both of you, have private health care coverage available for the children, you must fill out the "PRIVATE HEALTH CARE COVERAGE IS APPROPRIATE AND AVAILABLE" section. If *neither* you nor your spouse/partner have private insurance available for the children, you will fill out the section called: "NO PRIVATE INSURANCE IS APPROPRIATE OR AVAILABLE." Regardless of insurance availability, everyone must complete the section called: "RESPONSIBILITY FOR UNINSURED HEALTH EXPENSES." It may be appropriate to equally divide the expenses if no cash medical support is ordered or for the custodial parent to pay most or all of the uninsured expenses if cash medical support is being paid to that parent.

If Both Parties Already Agree.

If both parties agree on all issues, one party can file as petitioner, the other party can accept service of the petition and not file a response (if there is no disagreement with what the petitioner requested in the petition) and judgment will be entered based on what was stated in the petition.

If the respondent does not agree with you at first and files a response, then later decides that what you requested in the petition is okay, he or she can file a Waiver of Further Appearance and Consent to Entry of Judgment form to avoid having to go through the court process further (see Form #6J). Your local courthouse facilitator can help you with this process.

Filling out the Forms.

To get the case started, fill out the first set of forms, file them with the clerk and have the respondent "served" (have the papers delivered to respondent).

Fill out the following forms.

- *Petition for Custody, Parenting Time and Support*
- *Summons*
- *Certificate Re: Pending Child Support Proceedings and/or Existing Child Support Orders/ Judgments*
- *UTCR 2.130 Confidential Information Form (CIF)* (REQUIRED)
- *Notice of CIF Filing*
- *Certificate of Mailing (for use if you or the respondent is receiving public assistance)*

Social Security numbers and other confidential personal information.

There is certain personal information that can only be listed in a Confidential Information Form (CIF) and may not be listed in any of the other papers you file with the court. See the CIF information sheet that is part of this packet.

Make copies.

Make one copy of all of the forms for your records, and one copy of the *petition, summons, and Notice of CIF Filing* to serve on (deliver to) the respondent.

If either you or the respondent is receiving certain types of public assistance (Temporary Assistance to Needy Families or the Oregon Health Plan), you are also required to send a copy of the petition to the Division

of Child Support branch office in your county. The branch office address may be found at *http://www.dcs.state.or.us/offices.htm* or in the "Local Family Law Practices and Programs" form for your local court. Fill out and file the *Certificate of Mailing* after you have mailed the petition.

Have your documents reviewed.

You may have your documents reviewed by a lawyer or a courthouse facilitator (if your court has one) before you file. For information about how to find a lawyer, call the Oregon State Bar Lawyer Referral Service. If you are low income, you may get your documents reviewed for a smaller fee through the Oregon State Bar's Modest Means program, or you may call your local Legal Aid office. Contact numbers are listed in the additional resources section at the end of these instructions, and in the "Local Family Law Practices and Procedures" for your court attached to these instructions.

File the forms.

File all of the original forms that are listed above with the court clerk except the summons. The court clerk will ask you for a filing fee when you file your papers. Check with your local court to learn the amount of the filing fee. If you feel you can't afford to pay the fee, you may ask the court to waive or defer your filing fee. Use Packet #10 of these forms, or check with your local court to see if they require a different form. This form needs to be filled out and filed with the court. If the fee is waived, you don't have to pay the fee. If the fee is deferred, most courts will require that you pay the fee at a later date.

The clerk will give you a number of handouts when you file your papers. The handouts usually include a notice regarding mediation, family law guidelines and services, family law resource list, and possibly, information about local parent education classes. The clerk will give you two copies of each handout: one for you and one to be served on the respondent.

Parenting Classes.

Many courts require that parents of minor children go to a parent education class. If your court has this program, sign up for the class right away. Some courts will not allow you to finalize your case until you have completed the class and filed a certificate of completion with the court.

Have the other party served.

You are required to have the other party served (have papers delivered to) with (a) copies of the documents given to you by the clerk, and (b) certified copies of the petition and summons (you may certify the copies by signing your name where it says "I certify this is a true copy").

If the other party is willing to accept service, s/he must fill out the Acceptance of Service form, sign it in front of a notary or court clerk, then file it with the court. It is not necessary that the other party agree with what is in the papers, just that he/she is willing to acknowledge receipt of them.

If the other party will not complete the Acceptance of Service form, YOU CANNOT SERVE THE PAPERS YOURSELF. You may have service completed by the Sheriff in the county where the other party lives, by a private process server, or by another individual who is a competent person 18 years or older, an Oregon resident (or of the state where service is made) and not a party nor an attorney for a party. Caution should be used before asking a friend or relative to serve the papers if the other party might react angrily or violently. An Affidavit of Service along with the original summons must be filed with the court after service has been made.

The best way to serve the other party is to have the person serving the papers hand them directly to the respondent (personal service). If personal service cannot be done, there are other ways to serve the papers

including "substitute service," "office service," and "service by mail" — see the Table below. You may ask the Sheriff or a private process server about these other options or consult an attorney.

Standard Methods of Service	
Personal Service	Delivery of papers directly to the other party
Substitute Service	Delivery of papers to a person living at the other party's home who is at least 14 years old, PLUS mailing of the documents to the other party's home address by first class regular mail
Office Service	Delivery of papers to a person who appears to be in charge at the other party's place of employment (who has a business duty to give the documents to the other party), done during working hours, PLUS mailing of the document to the home or business address of the other party by first class regular mail
Service by Mail (Return Receipt Requested)	Delivery by mailing the documents certified or registered, return-receipt requested, or by Express mail, PLUS mailing of documents to home or business address of the other party by first class regular mail, PROVIDED the other party signs the "return receipt."

If you are not able to have the other party served by any of the methods described above, you may ask a judge to allow you to use another service method. The judge might allow you to publish, post, or mail the documents. In order to make this request, check with your local court for the appropriate form or use Packet 6A-Alternative Form of Service.

Serving Children Who are Necessary Parties. Because all unmarried, unemancipated children at least 18 and under 21 years of age are necessary parties to the case, they must also be served. Follow the same steps for serving your spouse for serving children who are parties to the case.

STEP 2: WAITING FOR A RESPONSE; TAKING A DEFAULT.

Oregon law gives the respondent 30 days to respond to your petition. The time starts running from the date of service. The response must be written, and must be filed with the required filing fee. The respondent may ask the court to waive or defer the fee.

If the Respondent is in the Military.

If the respondent is in the active military service of the United States and has not responded to the petition, you may have to go through some extra steps. The court won't go further with your case until one of the following things has happened: (1) the respondent is no longer in the active military, (2) the respondent has waived his or her rights using the Waiver of Right to Stay of Proceedings form, or (3) the judge holds a special hearing in your case. You may get a Waiver of Right to Stay of Proceedings form from the courthouse facilitator. You may need to talk to an attorney if the respondent is not willing to sign the waiver.

Check for Response.

The respondent should mail or deliver a copy of his or her response to you when it is filed with the court. If you haven't received a copy of a response after 30 days (from the date of service), you may check with the court clerk to see if one has been filed. If no response has been filed, you may request a "default order." A default means that you may ask the court to enter a judgment giving you the items you asked for in your petition, with no input from the respondent. If a response has been filed, you will not be allowed to take a default and you will skip the next two sections about requesting a default and go straight to step 3.

No Response Filed; Requesting a Default.

To ask the court to enter a default, you must fill out the following forms:

- *Ex Parte Motion for Order of Default; and Order*
- *Affidavit in Support of Motion for Order of Default*

After you make yourself a copy of the filled out forms, you may file the original with the court anytime after 30 days have expired from the date of service.

STEP 3: RESOLVING YOUR CASE

Temporary Orders.

You may ask the court to make temporary orders after the petition is filed. Temporary orders are in effect once signed by the judge and last until changed by the judge or until the final judgment is signed by a judge or the case is dismissed. To make any of these requests, file a "motion" (request) asking the court to do what you want. You may need the assistance of an attorney to file these requests.

Unless your court requires you to use a different form, you may use Packet 6B, Status Quo Order Application Packet, to ask the court to order that neither parent change the child/ren's usual place of residence, change the child/ren's regular routine, or interfere with the other parent's usual contact with the child. In addition, all courts have restraining order forms for cases involving domestic violence. A restraining order can usually be obtained within a day or two of filing if there has been abuse in the last 180 days, and if there is further danger of abuse. Check with your local court about forms and filing instructions.

Working Toward Agreement.

The court wants to help you resolve the issues that you and the respondent disagree on. You may discuss these issues with the respondent directly if it is safe for you to do so and if no court order prohibits that contact. You may also discuss them with the other parent's attorney. If you can't resolve the issues on your own, the court may provide a number of options to help you, including mediation and custody/parenting time evaluation.

Mediation. A mediator is a person trained to help people resolve disagreements. The parents may be required to meet with a mediator if you don't agree on a "parenting plan" (who has custody and parenting time (visitation) with the child/ren and how decisions about the child/ren will be made). You may ask to meet with the mediator alone if you are uncomfortable meeting with the respondent for any reason. There is usually no fee for this service. If mediation has not yet been ordered in your case and you would like to request it, you may file a Request for Mediation (see Form #6H or your local court's form). You may request that the mediation

requirement be waived if you have a good reason, by filing a Motion and Affidavit for Waiver of Mediation (see Form #6I). For example, if there has been domestic violence, the court will consider a request to waive the mediation requirement.

Custody/Parenting Time Evaluation. If parents can't agree on a parenting plan, sometimes the court refers the case to a custody or parenting time evaluator. After interviewing each parent and doing other research, the evaluator will make a recommendation to the judge about which parent should have custody and what the parenting plan should be. The evaluator will consider factors that might affect a child's safety, such as domestic violence, substance abuse, child abuse or other circumstances. Many courts require that the parties pay for part of the evaluation.

If the case is still not resolved after going through the process described above, the court will probably set a date for a "final hearing" or trial. Some judges may want you to attend a "settlement conference" (a meeting between the parties to discuss settlement, usually led by a different judge than your trial judge) to help you come to agreement.

Forms to Finalize Your Case.

The following forms are required to finalize your case:

- *Judgment of Custody, Parenting Time and Support*
- *Affidavit Supporting Judgment*

If the respondent did not file a response and the court has entered an Order for Default, or if the respondent responded and then filed a Waiver of Further Appearance and Consent to Entry of Judgment form, or if the respondent has signed the Judgment, you may also need the following:

- *Motion for Order Allowing Entry of Judgment on Affidavit in Lieu of Hearing; and Order*
- *Affidavit in Support of Motion for Order Allowing Entry of Judgment on Affidavit in Lieu of Hearing*

You may also need to file the following additional forms, depending on your circumstances.

- **Parenting Class Certificate of Completion.** If your local court requires parents of minor children to attend a parent education class, a certificate of completion must be filed with the court unless this requirement has been waived by order of the court.
- **Child Support Worksheets**. If child support is ordered in this case, child support worksheets need to be filled out and attached to the final judgment.
- **Parenting Plan.** Your parenting plan may be completely covered in the final judgment (see page two of the judgment). If there are additional pages, attach them.
- **Uniform Support Affidavit.** This form is only required if a response was filed, and the parents do not agree on child support. You aren't required to complete the schedules on the form unless one parent asks for a "deviation" (different amount than what was calculated using the child support guidelines) from the child support guidelines.
- **Waiver of Personal Service.** After the judgment is signed, if one parent doesn't do what it says, the other parent may ask the judge to enforce the judgment. The parent asking for enforcement is required to personally serve (deliver) the other parent with notice of this request. If you would like to keep your home address confidential, you may file this form listing another address for service. You are responsible for making sure you get all papers delivered to the address you list.

The Final Judgment.

The judgment finalizes your case and contains all of the issues decided in mediation, hearing, or through your agreement. Check with your local court to determine whether you should complete this form, or whether the judge will fill it out. If the parents agree on all issues, it may be prepared by either parent as long as it is reviewed and signed by both parents. If the parents don't agree on all issues, the judge may direct one parent to fill out the judgment.

If the respondent didn't file a response, the information you fill out in the final judgment should be the same as what you requested in the petition. If the respondent filed a response, the information should be the same as was decided in mediation, hearing or through your agreement.

If you are responsible for filling out and filing the final judgment, make a copy for yourself and one for the respondent (unless he or she didn't file a response), and file the original with the court. **If your case involves child support, file an extra copy of the proposed judgment with the court.**

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

In the Matter of:	)	
	)	Case No. _____
_____,	)	
Petitioner,	)	PETITION FOR CUSTODY AND PARENTING
	)	TIME under ORS 109.103
and	)	☐ and CHILD SUPPORT
	)	
_____,	)	DOMESTIC RELATIONS CASE SUBJECT TO
Respondent.	)	FEE UNDER ORS 21.111
	)	
and	)	
	)	
☐_____,	)	
Child who is at least 18 and under 21 years	)	
of age, unmarried and unemancipated.	)	
(ORS 107.108)	)	

1. Petitioner is the ☐mother ☐father and Respondent is the ☐mother ☐father of (names of children): _____, born on the following date/s: Do not list. Provide by UTCR 2.130 CIF

2. Paternity has been established:

☐ by filing with the State Registrar of Vital Statistics a voluntary acknowledgment of paternity, concerning the following child/ren (*e.g., birth certificate*): _____

_____

(*list name/s of child/ren involved*)

☐ by administrative order docketed with the following court: _____, as case number _____, located in _____ county, concerning the following child/ren: _____

_____

(*list name/s of child/ren involved*)

☐ by judicial order entered in the following court: _____, as case number _____, located in _____ county, concerning the following child/ren: _____

_____

(*list name/s of child/ren involved*)

☐ by another method: _____ concerning the following child/ren:_____

_____

(*list name/s of child/ren involved*)

///

3. The minor child/ren reside/s in _____ County, State of _____
The Petitioner resides in _____ County, State of _____
The Respondent resides in _____ County, State of _____

4. UCCJEA Information.

☐ **The child/ren listed above has/have continuously resided in Oregon for the six months preceding the filing of this case.** List the places where the minor child/ren of the parties has/have lived in the last five years and the names of the people they lived with at that time.

Dates From/To	County, State	Parent(s)/Caretaker	Current Address/ Contact Address of Parent/Caretaker	Which Children

☐ Additional page attached; see section labeled "paragraph 4 continued."

I ☐ have ☐ have not participated in any litigation concerning the custody, visitation, parenting time or placement of the child/ren in this or any other state. I have participated in the following litigation:

Name of Court	State	Case No.	Date	Result

I do not know of any other domestic violence, custody, visitation, parenting time or placement proceeding involving the child/ren, or of any other court case which could affect this case, pending in this or any other state
☐ except for:_____
(*identify court, case number and the kind of proceeding*)

I do not know any person other than the other parent who has physical custody of the child/ren or who claims to have custody, visitation or parenting time rights ☐ except for _____
_____
_____
(*list name and address*)

5. Parenting Plan (Custody and Parenting Time).

Custody of the child/ren should be awarded as follows:

☐ Petitioner should be awarded sole custody of the following child/ren *(list names)*: _____
_____

☐ Respondent should be awarded sole custody of the following child/ren *(list names)*:_____

_____

☐ The parties have agreed to joint custody of the following child/ren *(list names)*:_____

_____

☐ Petitioner ☐ Respondent should have parenting time with the child/ren ☐ as set forth in the attached Parenting Plan, labeled Exhibit _____, or ☐ Other: _____

_____

_____

_____

☐ Petitioner ☐ Respondent should not be granted parenting time because this would endanger the health and safety of the child/ren. **State supporting facts:** _____

_____

_____

_____

☐ Parenting time should be supervised by _____

☐ Any cost of the supervision shall be paid by ☐ Petitioner ☐ Respondent ☐ Other: _____

_____

☐ Petitioner and Respondent should 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.

☐ Petitioner should be allowed to move more than 60 miles further distant from the other parent without advance notice because good cause exists.

6. Child Support, including Health Care Coverage and Cash Medical Support.

A. **Other Pending Child Support Cases.** *(Check one.)*

☐ No other agency or court child support proceeding is currently pending *(include any child support matter being heard as part of a dissolution, separation, annulment, paternity, support or modification case).*

☐ There is/are other child support proceeding(s) currently pending in either an agency or court case as set forth in the CERTIFICATE RE: PENDING CHILD SUPPORT PROCEEDING and/or EXISTING CHILD SUPPORT ORDER attached to this petition.

B. **Other Child Support Orders.** *(Check one.)*

☐ No other child support orders, from an agency or court, are currently in effect in the State of Oregon or any other state.

☐ There is/are other child support orders from an agency or court as set forth in the CERTIFICATE RE: PENDING CHILD SUPPORT PROCEEDING and/or EXISTING CHILD SUPPORT ORDERS/JUDGMENTS attached to this petition.

C. **Currently Effective Child Support Order.** *(Check any that apply.)*

☐ The following child support order/s is/are currently in effect: _____

_____

(*List state, court/agency, case number, date of order*)

☐ This order should remain in place, ☐ and includes provisions for health care coverage for the child/ren, <u>or</u>

☐ This order is from an Oregon court or agency, one of the parents or the child/ren receiving support still resides in Oregon and the order should be changed because circumstances have changed since the last order was entered.

///

State facts showing how circumstances have changed: _____

_____

_____

☐ The following child support proceeding has been started but is not yet resolved (an order has not yet been issued): _____

(*list court/agency, and case number*)

D. **Cash Child Support.**

Complete either (1) or (2) below:

(1) ☐ Cash child support should be paid by ☐ Petitioner to Respondent (or) ☐ Respondent to Petitioner beginning on the ☐ first or ☐ _____ day of the month following the date of the judgment and continuing on the same day of each month thereafter. The total payment per month should be $_____, which is the presumed correct amount as reflected on the child support guideline worksheets attached to this petition.

☐ Determined under the Oregon child support guidelines prior to judgment.

☐ The amount of support presumed correct under the guidelines would be unjust or inappropriate because _____.

(The reasons must also be shown on the support worksheets you attach to this petition.)

(2) ☐ No cash child support is ordered in this judgment because:

☐ An order, ☐ including medical support, for child support in the monthly amount of $_____ has already been ordered in Circuit Court case number _____in _____ County, Oregon.

☐ Other reason: _____

_____

E. **Medical Support.** Complete section (1) or (2) below. Also complete section (3) or (4) below.

Complete (1) or (2):

(1) **Private Health Care Coverage is Appropriate and Available.**

☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent has/have appropriate private health care coverage available for the parties' child/ren through an employer, spouse, domestic partner or other source. ☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent should be required to obtain and maintain this coverage throughout the period of the support obligation for the benefit of the parties' child/ren.

☐ Health care coverage has already been ordered in another case as described in paragraph D(2) above.

(2) **No Private Health Care Coverage is Appropriate or Available.**

☐ Neither Petitioner nor Respondent has appropriate private health care coverage available for the parties' child/ren. ☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent should be ordered to provide appropriate private health care coverage for the child/ren when such coverage becomes available to them at a reasonable cost through any source.

☐ The custodial parent should enroll the child/ren in public health care coverage.

☐ The child/ren are currently enrolled in public health care coverage.

Complete (3) or (4):

(3) **Cash Medical Support Should Be Ordered.**

☐ Because the parent receiving cash child support is ordered to maintain private health care coverage and the parent paying cash child support is not, in addition to cash child support ☐ Petitioner ☐ Respondent should pay $_____ for cash medical support to ☐ Petitioner ☐ Respondent, or

☐ Neither parent has appropriate private health care coverage available for the parties' child/ren. ☐ Petitioner should pay cash medical support in the monthly amount of $_____ to Respondent. ☐ Respondent should pay cash medical support in the monthly amount of $_____ to Petitioner.

(4) **Cash Medical Support Should Not Be Ordered.**

☐ Cash medical support should not be ordered for the following reasons:

☐ The parent paying cash child support is also providing health care coverage.

☐ Petitioner's ☐ Respondent's gross monthly income is at or below the Oregon minimum wage for full-time employment or is eligible for Oregon public assistance.

☐ I am requesting that the parties share the cost of the child/ren's uninsured medical expenses (see paragraph G. below).

☐ Other reason: _____

_____

☐ All payments of child support should be made to the Department of Justice, Child Support Accounting Unit, P.O. Box 14506, Salem, Oregon, 97309 ☐ **by electronic payment withdrawal (EPW) or electronic funds transfer (EFT)**. In addition, support for a child attending school (between the ages of 18 and 21) as defined by Oregon law shall be distributed by the Department of Justice directly to the child subject to ORS 107.108.

☐ ***(Applies only if support enforcement services are not being provided.)***
Petitioner requests an exception to the income withholding requirement of ORS 25.378 allowing payment to be made directly to ☐ Petitioner's ☐ Respondent's checking or savings account. A receipt of deposit should be kept by the parent paying support as proof of payment. The parent receiving support should provide the paying parent with current deposit slips and/or bank name, account name, and account number.

F. RESPONSIBILITY FOR UNINSURED HEALTH EXPENSES.

☐ Petitioner should pay _____% ☐ and Respondent should pay _____% of the reasonably incurred uninsured HEALTH, ACCIDENT, DENTAL, ORTHODONTIC, AND OPTICAL HEALTH costs incurred by the child/ren. ☐ This obligation is in addition to any cash medical support ordered.

G. LENGTH OF CHILD SUPPORT.

Unless the child becomes self-supporting, emancipated, or married:

☐ The support ordered in paragraphs D., E., and F. for each child shall continue until the child reaches eighteen (18) years of age.

///

///

☐ The support ordered in paragraphs D., E.,and F. for each child shall continue until the child reaches age 21 if the the child qualifies for support as a child attending school as defined by Oregon Law.

H. <u>TAX DEPENDENTS.</u> *(Check one.)*

☐ Petitioner ☐ Respondent shall be entitled to claim the following child(ren) as dependent(s) for tax purposes beginning the year this judgment is entered *(list names)*: _____

_____

OR

☐ Other *(specify)*: _____

7. Life Insurance Coverage for Child/ren.

☐ Petitioner ☐ Respondent should obtain and maintain life insurance for the benefit of the parties' child/ren throughout the period of the support obligation. The coverage should be in the amount of $_____

8. Additional Provisions. _____

_____

_____

_____

☐ Additional page attached; labeled "Paragraph 8 Continued - Additional Provisions."

9. Information Required by ORS 25.020 and ORS 107.085.

☐ Disclosure of the following information would unreasonably put to risk the health, safety, or liberty of ☐ Petitioner ☐ Respondent or a child _____ for the following reasons: _____

_____

_____

_____

☐ Otherwise: *(Fill out the information in the table below)*

	Petitioner	Respondent
Full Name		
Former Legal Name(s)	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF
Age		
Address or Contact Address		
Telephone Number		
Social Security Number	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF
Drivers License Number	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF
Employer Name	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF

	Petitioner	Respondent
Employer Address	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF
Employer Telephone	Do not list. Provide by UTCR 2.130 CIF	Do not list. Provide by UTCR 2.130 CIF

☐ Additional page labeled "Paragraph 9 continued" attached.

10. Court Costs and Fees.

A. **Deferred Costs and Fees**

Any court costs and service fees (if service completed by the Sheriff) that are deferred (required to be paid at a later date) by the court should be paid by: ☐ Petitioner ☐ Respondent

☐ Both parties equally ☐ Other: _____

///

B. **Costs and Fees Paid by the Parties**

☐ Each party should be responsible for paying his or her own court costs and service fees for this case.

☐ To be paid by both parties equally

☐ Petitioner ☐ Respondent should reimburse the other party for his or her court costs and service fees for this case.

☐ Other: _____

Judgment should be entered according to the cost and fee allocation listed above.

11. 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.

12. Certificate of Residency.

I certify that the ☐ child resides or is found in, OR, ☐ one or both of the parties to this case currently live/s in the county in which this petition is being filed.

WHEREFORE, Petitioner requests a Judgment granting the relief asked for above, and other equitable relief that the Court thinks is just.

STATE OF _____)
) ss.
County of _____)

I, _____, being duly sworn, say that I am the Petitioner in this matter and that the foregoing petition is true and correct to the best of my knowledge.

_____
Petitioner, Signature Print Name

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

SIGNED AND SWORN to before me this _____ day of_____, 20_____
by _____

_____
Notary Public for _____/Court Clerk
My Commission Expires: _____

I certify that this is a true copy.

_____
Petitioner, Signature

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

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
	)	
and	)	SUMMONS
	)	
_____,	)	DOMESTIC RELATIONS SUIT
Respondent.	)	

TO:_____, Respondent.

Home Address	Work Address
_____	_____
_____	_____

A petition involving your child/ren has been filed with the court. If you do not file the appropriate legal paper with the court in the time required (see below), the petitioner may ask the court for a judgment against you that orders the relief requested.

NOTICE TO RESPONDENT: READ THESE PAPERS CAREFULLY!

You must "appear" in this case or the other side will win automatically. To "appear," you must file with the Court a legal paper called a "Response" or "Motion." Response forms may be available through the court located at:_____. This Response must be filed with the court clerk or administrator within thirty (30) days along with the required filing fee. It must be in proper form and you must show that the Petitioner's attorney (or the Petitioner if he/she does not have an attorney) was served with a copy of the "Response" or "Motion." The location to file your response is at the court address indicated above.

If you have questions, you should see an attorney immediately. If you need help finding an attorney, you may contact the Oregon State Bar's Lawyer Referral Service online at www.oregonstatebar.org or by calling (503) 684-3763 (in the Portland metropolitan area) or toll free elsewhere in Oregon at (800) 452-7636.

If special accommodation under the Americans with Disabilities Act is needed, please contact your local court at the address above; telephone number:_____.

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.

_____
Petitioner, Signature Print Name

_____
Address or Contact Address City, State, Zip

_____
Telephone or Contact Telephone

I certify that this is a true copy

_____
Petitioner's Signature

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

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	CERTIFICATE RE: PENDING CHILD SUPPORT
	)	PROCEEDINGS and/or EXISTING CHILD
_____,	)	SUPPORT ORDERS/JUDGMENTS
Respondent.	)	(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: _____
Court Case Number: _____

2. EXISTING CHILD SUPPORT ORDERS OR JUDGMENTS *(include any order/judgment whether made by an agency or a 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:

<u>ORDER/JUDGMENT #1</u> *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

///
///

///

ORDER/JUDGMENT #2 *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

ORDER/JUDGMENT #3 *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

ORDER/JUDGMENT #4 *(Attach a copy of the signed order)*:
Name/County of Court or Agency where issued: _____
Case Number: _____
Date of Order: _____

Attach additional sheets if necessary, labeled "Attachment 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_____.

_____
☐ Petitioner ☐ Respondent, Signature

_____
Print Name

_____
Address or Contact Address

_____
City, State, Zip Code

_____
Telephone or Contact Telephone

Information about the Confidential Information Form (CIF)

What is a CIF?
Most court files may be viewed by the public. Uniform Trial Court Rule (UTCR) 2.130 requires certain confidential personal information to be protected from public disclosure. That is done by providing the information in a separate form. After you file your papers, the court keeps the form separate from the part of the court file that may be viewed by the public. The form is UTCR Form 2.130.1, known as the Confidential Information Form, or CIF.

What information does a CIF make confidential?
The information protected by the CIF is social security numbers, birth dates, driver license numbers, and former legal names. Also protected are the name, address, and telephone number of a party's employer.

The CIF should only be used to protect the information described above. There may be other information in your court papers that you do not want the public to be able to see, such as bank account or credit card numbers. The separate process for protecting that information is described in UTCR 2.100, which can be read at:

http://courts.oregon.gov/OJD/programs/utcr/utcrrules.page?.

How do I know when I need to put information in the CIF?
When a document filed with the court requires you to include information protected by a CIF, that information must **only** be provided to the court in a CIF and must not be listed in any other document to be filed. Where you would otherwise provide the information in the document to be filed you must make a note that the information has been provided in the CIF. For example, if a document requires a party's full social security number to be listed, you must not list the social security number, but must instead make a note on the document that the information has been filed under UTCR 2.130. **The online court forms already have that note on the form.**

Do I need to file more than one CIF?
In most cases, yes. You must fill out a CIF for yourself, and if the documents you are filing with the court require confidential personal information about the other party, you must also fill out a separate CIF with the other party's information. If your case involves children, you should include their information in *your* CIF. You do not need a separate CIF for your children.

If there is CIF information you do not know when you file your papers, or if the information changes during your case, you must file an amended CIF that provides the new or updated information.

The CIF rule requires you to redact – black out or erase – confidential personal information from any attachments to documents you file with the court and to make a note on the attachment that the information has been provided in the CIF. The only exception is when you are required to attach a court-certified document. Documents that are required to be court certified should not be altered in any way.

Does the other party get copies of a CIF I file?
You are not required to serve the CIFs on the other party, though you may share a CIF with the other party if you chose to do so. You *are* required to serve the other party with UTCR Form 2.130.2, which is a notice that a CIF has been filed. You must also file a certificate with the court showing that you served the other party with the notice that a CIF was filed.

There are steps the other party and other people can go through to ask the court to allow them access to a CIF that you have filed. UTCR 2.130 explains that process in detail, and also describes the circumstances under which the court must deny a request by someone else to view a CIF you have filed.

The CIF rule (UTCR 2.130) can be read at:
http://courts.oregon.gov/OJD/OSCA/cpsd/courtimprovement/familylaw/familylawforms.page?
and you can find additional information about the rule at:
http://courts.oregon.gov/OJD/OSCA/cpsd/courtimprovement/familylaw/familylawforms.page?

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

In the Matter of:	)	Case No.:_____
_____	)	
☐Petitioner ☐Co-Petitioner, and	)	**FAMILY LAW CONFIDENTIAL INFORMATION FORM (CIF)**
	)	☐ **Amended**
_____	)	
☐Respondent ☐ Co-Petitioner.	)	**This document is not accessible to the public or other parties. Exceptions may apply. See UTCR 2.130.**
_____	)	
☐ Child At Least 18 But Under 21	)	

<u>ATTENTION COURT STAFF:</u> THIS IS A RESTRICTED ACCESS DOCUMENT.

The information below is about: ☐ Petitioner ☐ Respondent ☐ Co-Petitioner: _____

☐ Child At Least 18 But Under 21:_____

☐ Other:_____

Name (Last, First, Middle): _____

The names of the parties and the children, as well as the children's ages, are NOT confidential.

Former Legal Name (s) (if applicable):
Date of Birth:
Social Security Number:
Driver License (Number and State):
Name, Address, and Telephone Number of Employer:

Children's Names (Last, First, Middle)	Date of Birth	Social Security No.

Please attach an additional sheet if there are more than five children involved in the proceeding.

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

Date:_____ **Signature:**_____
Type or Print Name:_____

COMPLETED AND SUBMITTED BY:

☐ **Petitioner** ☐ **Respondent** ☐ **Co-Petitioner:**_____

☐ **Child who is at least 18 and under 21:**_____

☐ **Other:**_____

NOTE TO COURT STAFF: Unless ordered or authorized under UTCR 2.130, this Confidential Information Form is <u>not available</u> to the <u>opposing party or his/her attorney</u>, or to the <u>public</u>; except for the state.

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

In the Matter of:	)	Case No.:_____
_____	)	
☐Petitioner ☐Co-Petitioner, and	)	**FAMILY LAW CONFIDENTIAL INFORMATION FORM (CIF)**
	)	☐ **Amended**
_____	)	
☐Respondent ☐ Co-Petitioner.	)	**This document is not accessible to the public or other parties. Exceptions may apply. See UTCR 2.130.**
_____	)	
☐ Child At Least 18 But Under 21	)	

<u>ATTENTION COURT STAFF:</u> THIS IS A RESTRICTED ACCESS DOCUMENT.

The information below is about: ☐ Petitioner ☐ Respondent ☐ Co-Petitioner: _____

☐ Child At Least 18 But Under 21:_____

☐ Other:_____

Name (Last, First, Middle): _____

The names of the parties and the children, as well as the children's ages, are NOT confidential.

Former Legal Name (s) (if applicable):
Date of Birth:
Social Security Number:
Driver License (Number and State):
Name, Address, and Telephone Number of Employer:

Children's Names (Last, First, Middle)	Date of Birth	Social Security No.

Please attach an additional sheet if there are more than five children involved in the proceeding.

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

Date:_____ **Signature:**_____
Type or Print Name:_____

COMPLETED AND SUBMITTED BY:

☐ **Petitioner** ☐ **Respondent** ☐ **Co-Petitioner:**_____

☐ **Child who is at least 18 and under 21:**_____

☐ **Other:**_____

NOTE TO COURT STAFF: Unless ordered or authorized under UTCR 2.130, this Confidential Information Form is <u>not available</u> to the <u>opposing party or his/her attorney</u>, or to the <u>public</u>; except for the state.

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

In the Matter of:	)	Case No.:_____
_____	)	
☐Petitioner ☐Co-Petitioner,	)	**NOTICE OF FILING OF**
and	)	☐ **CONFIDENTIAL INFORMATION FORM (CIF)**
	)	☐ **Amended CIF**
_____	)	
☐Respondent ☐ Co-Petitioner.	)	
	)	
	)	
_____	)	
☐ Child At Least 18 But Under 21	)	

NOTICE: Confidential Information Form Has Been Filed

- Uniform Trial Court Rule (UTCR) 2.130 requires that parties to domestic relations cases place certain information about themselves and other parties in a CIF when such information is required in a document filed with the court.
- The CIF is not available for public inspection except as authorized by law.
- Parties are allowed to see a CIF that contains information about them.
- A party who wants to see a CIF that contains information about another party must ask for permission from the court or the other party by following the procedures set out in UTCR 2.130.

I am the (check one box):

☐ Petitioner ☐ Respondent ☐ Co-Petitioner:_____

☐ Child At Least 18 But Under 21:_____

☐ Other:_____

I filed Confidential Information Forms with the court about the following parties to this case:
(complete a section for each party for whom you have filled out a CIF)

1) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

2) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

3) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

4) Name (Last, First, Middle):_____
☐ Petitioner ☐ Respondent ☐ Co-Petitioner ☐ Adult Child ☐ Other:_____

Confidential Personal Information contained in CIF (check all that apply):

☐party's social security number, ☐party's date of birth, ☐children's social security number, ☐children's date(s) of birth, ☐employer's name, address, and telephone number, ☐driver license number, ☐former legal name(s).

Dated this_____day of_____, 20____.

_____

Signature Print Name

_____

Contact Address City, State, Zip Contact Telephone

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

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

I certify that on _____, 20_____, I mailed a true copy of the Petition for Custody, Parenting Time, and ☐ Child Support in the above case to the local branch office of the Department of Justice, Division of Child Support (*list address*): _____
_____

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, Signature

_____
Print Name

_____
Address or Contact Address

_____
City, State, Zip Code

_____
Telephone or Contact Telephone

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

In the Matter of:	)	Case No. _____
	)	
_____,	)	☐AFFIDAVIT ☐DECLARATION OF SERVICE
Petitioner,	)	☐ Personal Service (ORCP 7D(2)(a))
and	)	☐ Substitute Service (ORCP 7D(2)(b))
	)	☐ Office Service (ORCP 7D(2)(c))
_____,	)	☐ Service by Mail, Return Receipt Requested
Respondent.	)	(ORCP 7D(2)(d))

I, _____, ☐ being first duly sworn, say ☐declare I am a resident of the County of_____, State of _____. I am a competent person 18 years of age or older and not a party to or attorney in this proceeding. I certify that the person, firm, or corporation served is the identical one named in this action.

(Check one of the following):

1. ☐ **Personal Service.** On the _____day of _____, 20___, at _____ a.m./p.m., I served true copies of the original Petition, Summons, Notice of CIF Filing and notices on mediation and other information provided by the court clerk by delivering them to ☐ Petitioner ☐ Respondent _____ (name) in person at the following address _____ _____ within the County of _____, State of _____

2. ☐ **Substitute Service.** On the _ day of _____, 20____, at _____ a.m./p.m., I served true copies of the original Petition, Summons, Notice of CIF Filing and notices on mediation and other information provided by the court clerk by delivering them to_____(*name*), who is a person age 14 or older and a member of the household of the party to be served, at the following address _____within the County of _____, State of _____

(*Complete the section below only if the undersigned performed the follow-up mailing required by ORCP 7D(2)(b). If a party or other person other than the undersigned did the follow up mailing, s/he must use a separate Affidavit/Certificate of Mailing.)*

☐ On the _____ day of _____, 20___, I personally deposited a true copy of the Petition, Summons, Notice of CIF Filing and notices on mediation and other information provided by the court clerk with the United States Postal Service, via first class mail, in a sealed envelope, postage prepaid, addressed to the party to be served: ☐ Petitioner ☐ Respondent _____ (*name*), at the party's home address listed above, together with a statement of the date, time and place that the documents were hand-delivered to the party's dwelling (residence).

///
///
///

3. ☐ **Office Service.** On the _____ day of _____, 20____, at _____ a.m./p.m., I served true copies of the original Petition, Summons, Notice of CIF Filing and notices on mediation and other information provided by the court clerk by delivering them, in person, to the office of the party to be served, located at: _____ (*address*), during normal working hours for that office, where I left the documents with _____ (*name*), who is a person apparently in charge and who has a business duty to provide the documents to the party to be served. *(Complete the section below only if the undersigned performed the follow-up mailing required by ORCP 7D(2)(c). If a party or other person other than the undersigned did the follow up mailing, s/he must use a separate Affidavit/Certificate of Mailing.)*

☐ On the _____ day of _____, 20___, I personally deposited a true copy of the Petition, Summons, Notice of CIF Filing and notices on mediation and other information provided by the court clerk with the United States Postal Service, via first class mail, in a sealed envelope, postage prepaid, addressed to the party to be served: ☐ Petitioner ☐ Respondent (*name*) _____ ☐ business address, listed above, together with a statement of the date, time and place that the documents were hand-delivered to the party's office.

4. ☐ **Service by Mail, Return Receipt Requested.** On the _____ day of _____, 20_____, I personally deposited **two true copies** of the Petition, Summons, Notice of CIF Filing and notices on mediation and other information provided by the court clerk with the United States Postal Service, one via first class mail, and the other by certified or registered, return receipt requested, or by express mail, with postage on both copies fully paid, addressed to the party to be served: ☐ Petitioner or ☐ Respondent _____ (*name*), at the party's: ☐ home address located at:_____ _____(*address*). *(NOTE: If mailed return receipt requested, the return receipt should be attached to this Affidavit of Service.)*

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.

Complete ONE of the following:

IF AFFIDAVIT:

Dated this_____day of_____, 20_____.

_____

Signature of Server Print Name

_____

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

SIGNED AND SWORN to before me this_____ day of _____, 20 _____,
By _____.

_____
Notary Public for _____/Court Clerk
My Commission Expires: _____

OR

IF DECLARATION:

I hereby declare that the above statement is true to the best of my knowledge and belief, and that I understand it is made for use as evidence in court and is subject to penalty for perjury.

Dated this _____ day of _____, 20 _____.

_____

Signature of Server Print Name

_____

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

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

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	
	)	
	)	ACCEPTANCE OF SERVICE
	)	
_____,	)	
Respondent.	)	
STATE OF _____	)	
	)ss.	
County of _____	)	

I, _____, being first duly sworn, say: I am the Respondent in this matter and on _____ I received a true copy of the Petition, Summons, and Notice of CIF Filing (with attached notices on mediation and other information provided by the court clerk in the County of _____ _____ State of _____.

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.

_____

Signature of Respondent Print Name

_____

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

SIGNED AND SWORN to before me this _____day of _____, 20_____, by _____.

_____

Notary Public for _____/Court Clerk

My Commission Expires: _____

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

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	PETITIONER'S EX PARTE MOTION
	)	FOR ORDER OF DEFAULT;
_____,	)	and ORDER
Respondent.	)	

Motion

Based on the attached Affidavit, petitioner requests that this Court grant an Order entering the default of respondent for the reason that respondent was served with the Summons, Petition for Custody, Parenting Time, and Child Support and other documents required by law in _____County, State of _____, on _____, 20_____ and has not made an appearance within the time prescribed by law.

Statement of Points and Authorities

ORCP 69 requires the Court or Clerk to enter an order of default on a showing by affidavit or otherwise that a party against whom a judgment is sought has been served with Summons or is otherwise subject to the jurisdiction of the Court and has failed to plead or otherwise defend within the time set by law.

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, Signature

ORDER

☐ Allowed. ☐ Denied.

DATED this _____ day of _____, 20_____.

_____
Circuit Court Judge

_____
Print Name

Submitted by:

_____
Petitioner, Print Name Address or Contact Address

_____
City, State, Zip Telephone or Contact Telephone

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

In the Matter of ☐ the Marriage of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	PETITIONER'S ☐AFFIDAVIT ☐DECLARATION
	)	IN SUPPORT OF MOTION FOR ORDER
_____,	)	OF DEFAULT
Respondent.	)	

I, _____, am the Petitioner in this proceeding.

1. *Check one of the following:*
   A. ☐ The Respondent **is not** now, and was not at the time of the service of the Summons and Petition, in the active military service of the United States.
   B. ☐ The Respondent **is** now, or was at the time of the service of the Summons and Petition, in the active military service of the United States.
      ☐ (*check if applicable*) The Respondent has waived his/her rights under the Service-members' Civil Relief Act, as shown by the attached affidavit, labeled as Exhibit _____.
   C. ☐After diligent efforts, I am unable to determine whether or not the Respondent is now, or was at the time of the service of the Summons and Petition, in the active military service of the United States.
      ☐ (*check if applicable*) I have requested, but have not yet received, a determination from the Department of Defense regarding Respondent's military status.

2. REQUIRED: The following facts support my declaration regarding Respondent's military status:

_____

_____

3. Respondent is not now and was not at the time of the service of the Summons and Petition a minor, incapacitated, a financially incapable person, a protected person, or a Respondent in a fiduciary protective proceeding, as defined by Oregon law.

4. ☐ **Neither** the Respondent nor his/her Attorney **has filed appearance, appeared in court or provided** written notice of intent to file an appearance in this proceeding.

☐ The Respondent or his/her Attorney **has** filed an appearance, appeared in court or provided written notice of intent to file an appearance and I ☐have ☐have not served written notice of the application for an order of default on the Respondent or his/her Attorney at least 10 days before seeking this order of default pursuant to ORCP 69A(1).

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.

///

Complete ONE of the sections below:

IF AFFIDAVIT:

DATED this_____day of_____, 20_____.

_____

Petitioner, Signature Print Name

_____

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

SIGNED AND SWORN to before me this_____day of_____, 20_____.

by_____.

_____

Notary Public for_____/Court Clerk

My Commission Expires:_____

OR

IF DECLARATION:

I HEREBY DECLARE THAT THE ABOVE STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND THAT I UNDERSTAND IT IS MADE FOR USE AS EVIDENCE IN COURT AND IS SUBJECT TO PENALTY FOR PERJURY.

DATED this _____ day of _____, 20_____.

_____

Signature Print Name

_____

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

I certify this is a true copy:

_____

Petitioner's Signature

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

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	MOTION FOR ORDER ALLOWING
	)	ENTRY OF JUDGMENT ON AFFIDAVIT
_____,	)	IN LIEU OF HEARING; and ORDER
Respondent.	)	(ORS 107.095(4))

Motion

Based on ORS 107.095(4) and ☐ the co-petition of the parties (or) ☐ the Order of Default on record (or) ☐ Respondent appeared, but has waived the right to further appearance (or) ☐ the parties have stipulated to the entry of a general judgment, ☐ Petitioner ☐ Respondent requests that this Court grant an Order allowing entry of judgment based on the attached Affidavit in lieu of a hearing.

Statement of Points and Authorities

In a suit for dissolution of marriage where the parties are co-petitioners, or respondent is found by the Court to be in default, or the respondent appeared but waived further appearance, or the parties stipulate to the entry of a decree, ORS 107.095(4) authorizes the Court to enter a judgment of dissolution upon affidavit without a hearing.

ORDER

☐ Allowed. ☐ Denied.

DATED this _____ day of _____, 20_____.

_____
Circuit Court Judge

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.

Date:_____ ☐ Petitioner's ☐ Respondent's Signature:_____

Submitted by:

_____
☐ Petitioner ☐ Respondent (Print Name) Address or Contact Address

_____
City, State, Zip Telephone or Contact Telephone

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

In the Matter of:	)	
	)	
_____,	)	Case No. _____
Petitioner,	)	
and	)	PETITIONER'S AFFIDAVIT
	)	SUPPORTING JUDGMENT
_____,	)	
Respondent.	)	
STATE OF _____	)	
	) ss.	
County of _____	)	

I, _____, being first duly sworn, say: I am the petitioner in this proceeding. Respondent and I are the parents of the following minor child/ren: _____

_____

(*List name(s). Date(s) of birth provided in UTCR 2.130 CIF*)

☐ Respondent has not appeared in this matter and an Order of Default has been entered.

☐ Respondent filed a response and later ☐ signed and filed a Waiver of Further Appearance and Consent to Entry of Judgment, (or) ☐ has waived further hearing by stipulating to the terms of the Judgment.

This case is now ready for a hearing on the merits. I make this affidavit in support of a Judgment without a hearing. The allegations in my Petition are true and it is just and reasonable that the relief requested be granted in the proposed judgment.

☐ Child custody or child support is involved in this case and at the time of filing:

☐ The child/ren had continuously resided in Oregon for six months before this case was filed.
☐ List any other basis for child custody jurisdiction _____

_____

The current residence of the minor child/ren is/are:

Name of Child	Resides With (Name, Address or Contact Address)	For How Long

☐ Additional page attached, labeled "Information About Child/ren, Continued."

☐ Parenting time should not be ordered because my child/ren's health or safety would be endangered because: _____
_____

☐ I have good reason for the court to allow me to move more than 60 miles further distant from the other parent without giving written advance notice to the other parent. My good cause is: _____
_____

☐ Child support is involved: Petitioner's average gross monthly income is approximately $_____ Respondent's average gross monthly income is approximately $ _____. Work or school related daycare is $_____/month and is paid by ☐ Petitioner ☐ Respondent. Health insurance for our child/ren costs $_____/month out of pocket and is paid by ☐ Petitioner ☐ Respondent.

The child support amount I have requested ☐ does not deviate from the amount presumed correct under Oregon Administrative Rules, or ☐ does deviate from the presumed amount of $ _____ per month because:__
_____

☐ Child support is involved and Respondent does not live in Oregon.
(*If you checked the box above, check any of the following boxes that are true*)

☐ Respondent was personally served with the petition in Oregon.
☐ Respondent lived in Oregon with the child.
☐ Respondent lived in Oregon and paid expenses for the birth or support of the child.
☐ The child was possibly conceived in Oregon.
☐ The child lives in Oregon because of the wishes of Respondent.
☐ Respondent and I both lived in Oregon at the same time (either together or separately) during the marriage for a period of six months, beginning *(list dates)* _____ and ending on _____ and less than one year has passed since respondent moved to a new residence out of state.
☐ Other basis for jurisdiction: _____

☐ A child support order currently exists and I requested that this court issue a new order because the existing order was issued by an Oregon court or agency, one of the parents or the child/ren receiving support under the order still resides in Oregon, and circumstances have changed since the first order was entered. The changed circumstances are *(explain what has changed since the last order)*:_____
_____

☐ Petitioner has **private** health care coverage available to cover the child/ren at an out-of-pocket cost of $_____ per month for the child/ren's portion of the coverage. ☐ This health care coverage should be ordered.

☐ Respondent has **private** health care coverage available to cover the child/ren at an out-of-pocket cost of $_____ per month for the child/ren's portion of the coverage. ☐ This health care coverage should be ordered.

☐ Neither Petitioner nor Respondent has appropriate **private** health care coverage available for the parties' child/ren and,

☐ The custodial parent should be ordered to apply for and enroll the child/ren in **public** health care

coverage.

☐ Petitioner ☐ Respondent has already applied to enroll the child/ren in **public** health care coverage. This coverage should be maintained if the child/ren are accepted for enrollment.

☐ The child/ren are currently enrolled in **public** health care coverage. This coverage should be maintained.

☐ Petitioner should be ordered to provide appropriate **private** health care coverage when such coverage becomes available to him/her through any source.

☐ Respondent should be ordered to provide appropriate **private** health care coverage when such coverage becomes available to him/her through any source.

☐ Cash medical support should be ordered because:

☐ Neither party has appropriate **private** health care coverage available for the child/ren.

☐ The party receiving cash child support is also the party providing **private** health care coverage.

The child support worksheet submitted with my judgment shows that cash medical support should be $_____ per month.

☐ Petitioner ☐ Respondent should pay, in addition to cash child support, cash medical support in the amount of $_____ per month.

☐ Cash medical support should not be ordered because:

☐ Petitioner ☐ Respondent has income that is no more than full-time Oregon minimum wage.

☐ Petitioner ☐ Respondent is eligible for Oregon public assistance.

☐ The parties should share the child/ren's uninsured medical expenses as described below.

☐ Other reasons: _____

☐ Petitioner should pay _____% ☐ and Respondent should pay _____% of the uninsured HEALTH, ACCIDENT, DENTAL, ORTHODONTIC, AND OPTICAL HEALTH costs incurred by the child/ren. This obligation should be ☐ in addition to ☐ instead of cash medical support.

Note that if your judgment is by default, it cannot be different than what you asked for in your petition, unless the parties agree otherwise or unless circumstances have changed since your petition was filed.

☐ I request that personal information, such as telephone number, address and employment information, not be disclosed in the court's judgment as otherwise required by ORS 25.020 and ORS 107.085 because my health, safety or liberty, or that of my child/ren _____ would unreasonably be put at risk by such disclosure. **State supporting facts:** _____

_____

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: _____, 20_____.

_____

Petitioner's Signature Print Name

_____

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

SIGNED AND SWORN to before me this_____ day of _____, 20_____,

by _____

_____

Notary Public for _____/Court Clerk

My Commission Expires: _____

I certify that this is a true copy:

_____

Petitioner's Signature

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

In the Matter of:

_____, Petitioner,	)	Case No. _____
and	)	GENERAL JUDGMENT OF CUSTODY AND PARENTING TIME ☐ and SUPPORT ☐ ORDER RE: JURISDICTION AND MONEY AWARD
_____, Respondent,	)	
and	)	
☐ _____, Child who is at least 18 and under 21 years of age, unmarried and unemancipated. (ORS 107.108)	)	

1. This matter came before the Court:

☐ On the motion and affidavit of Petitioner, the default of Respondent having been found.

☐ On the motion of Petitioner, the default of Respondent having been found, and Respondent being represented by a guardian ad litem or another person described in Rule 27.

☐ On the motion and affidavit of Petitioner, Respondent having filed a Waiver of Further Appearance.

☐ 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 _____

2. Findings. The Court considered the: ☐ Affidavit ☐ Affidavit and stipulations ☐ Evidence presented and found that:

A. Children of the Parties. List names, dates of births, and ages.

Name	Date of Birth	Age
	Do not list. Provide by UTCR 2.130 CIF.	
	Do not list. Provide by UTCR 2.130 CIF.	
	Do not list. Provide by UTCR 2.130 CIF.	
	Do not list. Provide by UTCR 2.130 CIF.	
	Do not list. Provide by UTCR 2.130 CIF.	

B. Child Custody Jurisdiction. (*Check appropriate boxes*)

☐ Oregon has jurisdiction under the Uniform Child Custody Jurisdiction and Enforcement Act to hear the ☐ custody ☐ parenting time issue because:

☐ Oregon is the child/ren's home state (i.e., the child/ren have lived here continuously for the six month period immediately before this case was filed).

☐ Other reason: _____

_____

_____

☐ Oregon does not have jurisdiction under the Uniform Child Custody Jurisdiction Act because:

_____

_____

C. Child/ren Who Are At Least 18 and Under 21 Years of Age.

_____ (child/ren's name/s) is/are at least 18 and under 21 years of age, is unmarried and unemancipated and has:

☐ Waived further appearance in these proceedings.

☐ Signed and stipulated to the terms of judgment evidenced by the signature below.

☐ Fully participated in the proceedings and the judgment effectively binds him/her to the terms.

NOW, THEREFORE, IT IS HEREBY ORDERED:

The terms of this judgment are effective immediately.

1. Parenting Plan

Custody of the child/ren is awarded as follows:

☐ Petitioner is awarded sole custody of the following child/ren *(list names)*:_____

_____

☐ Respondent is awarded sole custody of the following child/ren *(list names)*: _____

_____

☐ The parties have agreed to joint custody of the following child/ren *(list names)*:_____

_____

☐ Petitioner ☐ Respondent should have parenting time with the child/ren ☐ as set forth in the attached Parenting Plan, labeled Exhibit ____, or ☐ Other: _____

_____

_____

_____

☐ 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. Cash Child Support.

Complete either (a) or (b) below:

(a) ☐ Cash child support must be paid by ☐ Petitioner to Respondent (or) ☐ Respondent to Petitioner beginning on the ☐ first or ☐ _____ of the month following the date of the judgment and continuing on the same day of each month thereafter. The total payment per month is $_____ for _____ children.

The cash child support:

☐ Is the amount presumed to be appropriate under the support guidelines.

☐ Is different from the presumed appropriate amount of $_____ because (list reasons) _____.

☐ The child support worksheet on which the support amount was calculated is labeled "Exhibit_____" and attached to and incorporated in this judgment

(b) ☐ No cash child support is ordered in this judgment because:

☐ An order, ☐ including medical support, for child support in the monthly amount of $_____ has already been ordered in Circuit Court case number _____ in _____ County, Oregon.

☐ Other reason:_____

3. Medical Support. Complete section (a) or (b) below. Also complete section (c) or (d) below.

Complete (a) or (b):

(a) Private Health Care Coverage is Appropriate and Available.

☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent has/have appropriate private health care coverage available for the parties' child/ren through an employer, spouse, domestic partner or other source. ☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent is/are ordered to obtain and/or maintain this coverage throughout the period of the support obligation for the benefit of the parties' child/ren.

☐ Health care coverage is not ordered in this judgment because it has already been ordered in another case as described in section 2(b) above.

(b) No Private Health Care Coverage is Appropriate or Available.

☐ Neither Petitioner nor Respondent has appropriate private health care coverage available for the parties' child/ren. ☐ Petitioner ☐ Respondent ☐ Both Petitioner and Respondent must provide appropriate private health care coverage for the child/ren when such coverage becomes available to them at a reasonable cost through any source.

☐ The custodial parent shall enroll or maintain the child/ren in public health care coverage.

Complete (c) or (d):

(c) Cash Medical Support Ordered.

☐ Because the parent receiving cash child support is ordered to maintain private health care coverage and the parent paying cash child support is not ordered to maintain private health insurance, in addition to cash child support ☐ Petitioner ☐ Respondent must pay $_____ for cash medical support to ☐ Petitioner ☐ Respondent.

☐ Because neither parent has appropriate private health care coverage available for the parties' child/ren: ☐ Petitioner must pay cash medical support in the monthly amount of $_____ to Respondent and/or ☐ Respondent must pay cash medical support in the monthly amount of $_____ to Petitioner.

(d) Cash Medical Support Not Ordered.

☐ Cash medical support is not ordered for the following reasons:

☐ The parent paying cash child support is also providing health care coverage.

☐ Section (e) below requires the parties to share the cost of the child/ren's uninsured medical expenses.

☐ Petitioner's ☐ Respondent's gross monthly income is at or below the Oregon minimum wage for full-time employment.

☐ Other reason: _____

_____

(e) Responsibility for Uninsured Health Expenses.

After the custodial parent pays the first $250 per year per child, ☐ Petitioner must pay _____% and Respondent must pay _____% of the reasonably incurred uninsured health, accidental, dental, orthodontic, and optical costs incurred by the child/ren, including costs for prescriptions. This obligation is ☐ in addition to ☐ instead of any cash medical support ordered above in paragraph 2 as part of the child support award.

4. Length of Child Support.

Unless the child becomes self-supporting, emancipated, or married:

☐ The support ordered in paragraphs 2 and 3 above for each child shall continue until the child reaches eighteen (18) years of age.

☐ The support ordered in paragraphs 2 and 3 above for each child shall continue until the child reaches age 21 if the child qualifies for support as a child attending school as defined by Oregon law.

NOTICE ABOUT PERIODIC REVIEWS

If you are receiving child support services through the Department of Justice pursuant to option (a) above, either parent may request that the Department of Justice/Division of Child Support review the amount of support ordered after three years from the date the order took effect or at any time upon a substantial change of circumstances.

5. Payment of Child Support

Pursuant to ORS 25.378(1), an income withholding order shall be issued to enforce the child support obligation unless an exception is indicated below.

☐ **Exceptions to withholding.** Income withholding is not ordered at this time because there is no support arrearage, the paying parent has not previously been granted an exemption from withholding, and:

☐ The parents, and the State, if support rights are assigned, have agreed in writing to an alternative arrangement; or

☐ Good cause not to require withholding is found because there is proof of timely payment of previously-ordered support and income withholding would not be in the best interests of the child.

All payments of child support shall be made (*check either (a) or (b) below*):

(a) ☐ To the Oregon Department of Justice, Child Support Accounting Unit, P.O. Box 14506, Salem, Oregon, 97309 or ☐ by electronic payment withdrawal (EPW) or electronic funds transfer (EFT). By petitioner's request, collection, accounting disbursement, and enforcement services of this obligation shall be through the State of Oregon's Department of Justice.

(b) ☐ Pursuant to the above exception, directly to ☐ Petitioner's ☐ Respondent's checking or savings account. A receipt of deposit shall be kept by the parent paying support as proof of payment. A canceled check is also prima facie evidence that payment has been made. The person receiving support shall provide the paying parent with current deposit slips and/or bank name, account name and account number.

NOTICE OF INCOME WITHHOLDING

This child support order is enforceable by income withholding under ORS 25.378 to 25.390, 25.414 to 25.372 and 25.375. Withholding shall occur immediately, whenever there is an arrearage at least equal to the support payment for one month, whenever the obligated parent requests such withholding, or whenever the obligee requests withholding for good cause. The District Attorney or, as appropriate, the Division of Child Support of the Department of Justice, will assist in securing such withholding. Exceptions may apply in some circumstances.

6. Dependents for Tax Purposes.

☐ Petitioner ☐ Respondent shall be entitled to claim the following child(ren) as dependent(s) for tax purposes beginning the year this judgment is entered (*list names*): _____

_____

_____,

OR

☐ Other *(specify)*: _____

_____

_____

7. Life Insurance Coverage for Child/ren.

☐ Petitioner ☐ Respondent shall obtain and maintain life insurance for the benefit of the parties' child/ren throughout the period of the support obligation if he/she is insurable. The coverage shall be in the amount of $_____.

///

///

NOTICE ABOUT PARENTING TIME AND CHILD SUPPORT

The terms of child support and parenting time (visitation) are designed for the child's benefit and not the parents' benefit. You must pay support even if you are not receiving parenting time. You must comply with parenting time and visitation orders even if you are not receiving child support.

Violation of child support orders and visitation or parenting time orders is punishable by fine, imprisonment or other penalties.

Publicly funded help is available to establish, enforce, and modify child support orders. Paternity establishment services are also available. Contact your local district attorney, the domestic relations court clerk, or the Department of Justice at 1-800-850-0228 or 503-378-5567 for information.

Publicly funded help may be available to establish, enforce, and modify parenting time or visitation orders. Forms are available to enforce parenting time or visitation orders. Contact the domestic relations, civil court clerk or courthouse facilitator for information.

NOTICE ABOUT PERIODIC REVIEW AND MODIFICATION OF CHILD SUPPORT ORDERS

If your child support case is handled by the District Attorney or the Department of Justice Division of Child Support, this agency will review your child support order if at least three years have passed since the order was entered, modified, or last reviewed. *This review will take place only if a parent requests.*

The purpose of the review is to see if the amount ordered is still within the guidelines for child support set out in Oregon law. The review could result in an increase or decrease in the support amount, depending on the parents' financial circumstances and the needs of the child.

This "periodic review" service is provided at no cost to parents, but is available only for cases handled by the District Attorney or the Department of Justice.

The support agency handling your case will also review your support order for compliance with the guidelines whenever a substantial change in circumstance has occurred. You can request this "change in circumstance" modification from the support agency. But *any* support order (not just orders handled by the District Attorney or Department of Justice) can be modified because of a change in circumstance, so a private attorney is able to assist you with this, too. You may also represent yourself.

8. Additional Provisions: _____

_____

_____

☐ Additional page attached labeled "Paragraph 8 - Additional Provisions continued."

9. Court Costs and Fees.

A. Deferred Costs and Fees

Any court costs and service fees (if service was completed by the Sheriff) that were deferred (required to be paid at a later date) by the court shall be paid by:

☐ Petitioner

☐ Respondent.

☐ Both parties equally

☐ Other:_____.

///

B. Costs and Fees Paid by the Parties

☐ Each party shall be responsible for paying his/her own court costs and service fees for this case.

☐ To be paid by both parties equally

☐ Petitioner ☐ Respondent shall reimburse the other party for his/her court costs and service fees for this case.

Other: _____.

Judgment shall be entered according to the cost and fee allocation listed above.

10. Information Required by ORS 25.020.

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

☐ Otherwise: *(Fill in the blanks in the table below.)*

	Petitioner	Respondent
Full Name		
Former Legal Name(s)	Do not list. Provide by UTCR 2.130 CIF.	Do not list. Provide by UTCR 2.130 CIF.
Age		
Address or Contact Address		
Telephone Number		
Social Security Number	Do not list. Provide by UTCR 2.130 CIF.	Do not list. Provide by UTCR 2.130 CIF.
Drivers License Number	Do not list. Provide by UTCR 2.130 CIF.	Do not list. Provide by UTCR 2.130 CIF.
Employer Name	Do not list. Provide by UTCR 2.130 CIF.	Do not list. Provide by UTCR 2.130 CIF.
Employer Address	Do not list. Provide by UTCR 2.130 CIF.	Do not list. Provide by UTCR 2.130 CIF.
Employer Telephone	Do not list. Provide by UTCR 2.130 CIF.	Do not list. Provide by UTCR 2.130 CIF.

☐ Additional page labeled "Paragraph 10 continued" attached.

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 above 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 by means of this Judgment in Paragraph 17 above, the Department of Justice or the District Attorney shall not disclose the information in the preceding section to the other parent.

11. 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 the Obligor's Social Security Number		
Last Four Digits of Driver's 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		**Amount of Judgment**
Child Support Award	WHO PAYS ☐ Petitioner ☐ Respondent	1. $_____☐ per month or ☐ Other: _____, starting on the ☐ first day or ☐ Other: _____ of the month following the date of the judgment ☐ Of this Child Support Award, $ _____ constitutes "cash medical support"
	WHO RECEIVES ☐ Petitioner ☐ Respondent	
Prejudgment Interest	WHO PAYS ☐ Petitioner	

(Note: ORS 21.607(1) disallows interest on fees that have been deferred.)	☐ Respondent WHO RECEIVES ☐ Petitioner ☐ Respondent	$_____ $_____
Postjudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.)	WHO PAYS ☐ Petitioner ☐ Respondent WHO RECEIVES ☐ Petitioner ☐ Respondent	Nine percent (9 %) per annum simple interest on the unpaid balance of the total judgment amount(s) of $_____. Interest accrues from the date the judgment is entered and continues until fully paid.
Accrued Arrears (if any, on judgments to be paid on a periodic basis)	WHO PAYS ☐ Petitioner ☐ Respondent WHO RECEIVES ☐ Petitioner ☐ Respondent	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)	WHO PAYS ☐ Petitioner ☐ Respondent WHO RECEIVES ☐ Petitioner ☐ Respondent	$_____ $_____
Attorneys Fees (if any)	WHO PAYS ☐ Petitioner ☐ Respondent WHO RECEIVES ☐ Petitioner ☐ Respondent	$_____ $_____

DATED this _____ day of _____, 20_____.

_____
Circuit Court Judge

_____
Print Name

APPLICATION FOR CHILD SUPPORT PROGRAM SERVICES: By signing below, I apply for child support services from the Child Support Program(CSP). (Note: If you never received TANF, tribal TANF or AFDC in any state, an annual $25 fee will apply if over $500 is collected and distributed to the family each year.)

_____ _____

☐Petitioner, Signature Date

_____ _____

☐Respondent, Signature Date

☐ **All parties have agreed (stipulated) to the terms of this judgment. Sign before a Notary Public or Court Clerk only.**

_____

Petitioner, Signature

State of _____)
County of _____)

This instrument was acknowledged before me on _____ of _____, 20_____, (date)

by _____(name of person).

_____
Notary Public for_____/Court Clerk
My Commission Expires:_____

_____

Respondent, Signature

State of _____)
County of _____)

This instrument was acknowledged before me on _____ of _____, 20_____, (date)

by _____(name of person).

_____
Notary Public for_____/Court Clerk
My Commission Expires:_____

///

///

☐If applicable, child who is at least 18 and under 21 years of age, has agreed (stipulated to the terms of this judgment: (sign only your name)

_____
Child, Signature

State of _____)
County of _____)

This instrument was acknowledged before me on _____ of _____, 20_____, (date)

by _____(name of person).

_____
Notary Public for_____/Court Clerk
My Commission Expires:_____

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:

_____
☐ Petitioner ☐ Respondent, Signature Print Name

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

Certificate of Mailing. I certify that I mailed a copy of this judgment and attachments thereto by U.S. Mail with postage paid to the other party at the following address: _____ on the following date:_____.

_____ _____
☐ Petitioner ☐ Respondent, Signature Print Name

I certify that this is a true copy:

_____
☐ Petitioner ☐ Respondent, Signature