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IN THE CIRCUIT COURT OF THE STATE OF OREGON

FOR THE COUNTY OF _____

_____)	
Petitioner (your name),)	Case No. _____
)	
vs.)	PETITIONER'S CERTIFICATE
)	OF DOCUMENT PREPARATION
_____)	(Family Abuse Prevention Act)
Respondent (person to be restrained).)	

(If you completed the document(s) you are filing with the court without the assistance of an attorney, you are required to complete truthfully this certificate. Check or complete all blanks that apply:

_____ I selected the attached form(s)/document(s) for myself, and I completed it/them without paid assistance.

_____ I paid, or will pay, money to _____ for assistance in preparing the attached form(s)/document(s).

_____ Other. (See instructions) Name: _____

Documents: _____

Signature of Petitioner Date

Print or Type Name of Petitioner

Address or Contact Address

City State Zip

Telephone or Contact Telephone Number(s)