

6. Children Born or Adopted to Both Parties.

Name	Date of Birth	Social Security No.	Address
	Do not list. Provide in UTCR 2.130 CIF.	Do not list. Provide in UTCR 2.130 CIF.	
	Do not list. Provide in UTCR 2.130 CIF.	Do not list. Provide in UTCR 2.130 CIF.	
	Do not list. Provide in UTCR 2.130 CIF.	Do not list. Provide in UTCR 2.130 CIF.	
	Do not list. Provide in UTCR 2.130 CIF.	Do not list. Provide in UTCR 2.130 CIF.	

- Additional page attached; see section labeled “paragraph 6 continued.”
- Co-Petitioner, (*write name*) _____, is pregnant.
- Co-Petitioner (*write name*) _____ is is not the parent of this child.
- The expected date of the child’s birth is _____.
- Neither party is now pregnant.

7. Child/ren Born During Marriage/Domestic Partnership.

List any child/ren born during the marriage/domestic partnership that either party is not the parent of, and that were not conceived when the parties were living together: _____

(*name/s and year/s of birth*)

8. UCCJEA Information.

The child/ren listed above in Paragraph 6 has/have continuously resided in Oregon for the six months preceding the filing of this case. Starting with the child/ren’s current address/whereabouts, list the places where the minor child/ren of the parties has/have lived in the last five years and the names and current addresses of the persons 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 8 continued.”

We 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. We have participated in the following litigation:

Name of Court	State	Case No.	Date	Result

We 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*)

We do not know any person other than each other 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)

9. Parenting Plan (Custody and Parenting Time).

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

Co-Petitioner, (write name) _____ should be awarded sole custody of the following child/ren (list names): _____

Co-Petitioner, (write name) _____ 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): _____

Co-Petitioner, (write name) _____ should have parenting time with the child/ren as set forth in the attached Parenting Plan, labeled Exhibit _____, or Other: _____

Co-Petitioner, (write name) _____ 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 Co-Petitioner, (write name) _____

Other: _____

Co-Petitioners 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.

ORS 107.159 requires that neither party may move to a residence more than 60 miles further distant from the other parent without giving the other parent reasonable advance notice of the change of residence.

Co-Petitioner, (write name) _____ should be allowed to move more than 60 miles further distant from the other parent without advance notice because good cause exists.

10. 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 medical support for the child/ren,
or

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: _____

D. Cash Child Support.

Complete either (1) or (2) below:

(1) Cash child support should be paid by Co-Petitioner (write name) _____ to
Co-Petitioner (write name) _____.

The monthly amount of support should be \$ _____ for _____ children.

This is the amount presumed correct under the Oregon Child Support Guideline as shown in
the attached support calculation worksheet, labeled Exhibit _____. **or**

This amount differs from the presumed correct Oregon Child Support Guideline amount of
\$ _____. The guideline amount would be unjust or inappropriate for the following reasons:

 The judgment should require Co-Petitioner _____ to begin paying
support on :

The first (or _____) day of the month following the date of the judgment and continuing on
the same day of each month thereafter. **or**

Other date as follows _____ (date) and continuing on the same day of each month
thereafter.

(2) No cash child support should be ordered in this case 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.**

Co-Petitioner _____ Both Co-Petitioners has/have appropriate private
health care coverage available for the parties' child/ren through an employer, spouse, domestic
partner or other source. Co-Petitioner _____ Both Co-Petitioners 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 above.

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

Neither party has appropriate private health care coverage available for the parties' child/ren. Co-Petitioner _____ Both Co-Petitioners should 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.

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.

Complete (3) or (4):

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

Because neither parent has appropriate private health care coverage available for the parties' child/ren: The parent obligated to pay child support must pay cash medical support in the monthly amount of \$_____ to the parent receiving child support whenever the paying parent does not provide appropriate private health care for the child/ren. This medical support may be collected by and assigned to the State of Oregon if the child is on public health care.

NOTE: Cash medical support **must** be ordered whenever neither parent provides appropriate private health care coverage for the child/ren, *unless* the court finds otherwise, by adopting the exception you include below in the "Cash Medical Support Should Not be Required" section.

or

To help defray the cost of health care coverage provided by Co-Petitioner _____ for the parties' child/ren, or to help defray the cost of uninsured medical expenses, Co-Petitioner _____ should pay cash medical support in the monthly amount of \$_____ to Co-Petitioner _____.

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

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

One or both Co-Petitioners already provide private health care coverage for the child/ren.

Co-Petitioner _____'s Both Co-Petitioners' gross monthly income is at or below the Oregon minimum wage for full-time employment or is eligible for Oregon public assistance.

We are requesting that the parties share the cost of the child/ren's uninsured medical expenses.

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.*)

Co-Petitioners request an exception to the income withholding requirement of ORS 25.378 allowing payment to be made directly to Co-Petitioner _____'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.

Co-Petitioner _____ should pay _____% and Co-Petitioner _____ should pay _____% of the 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 for each child should continue until the child reaches eighteen (18) years of age.

The support for each child should continue until age 21 if the child qualifies for support as a child attending school as defined in ORS 107.108

H. TAX DEPENDENTS. (*Check one.*)

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

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

Other (*specify*): _____

11. Life Insurance Coverage for Child/ren.

Co-Petitioner _____ Both Co-Petitioners 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 \$_____.

12. Additional Provisions. _____

Additional page attached; labeled "Paragraph 12 Continued - Additional Provisions."

13. Spousal Support and Life Insurance.

No spousal support or life insurance claims are made in this case (skip the rest of paragraph 13).

Spousal Support should be ordered as follows:

A. Spousal Support.

Support should be paid by (write name) _____ to

(write name) _____.

In the amount of \$ _____ per month for the following period of time: _____

OR

In the lump sum amount of \$ _____, to be paid by (date) _____.

List reason(s) support should be paid: _____

The support shall be called (check one or more): transitional compensatory maintenance based on consideration of the following factors (list): _____

Support payments are taxable to the obligee spouse/domestic partner and deductible to the obligor spouse/domestic partner. All payments terminate upon the death of either party.

Payments.

Spousal support payments should be made:

The first (or _____) day of the month following the date of the judgment and continuing on the same day of each month thereafter, **or**

Other date as follows _____ (date) and continuing on the same day of each month thereafter.

All payments of spousal support should be made: (check (a) or (b)):

(a) To the Department of Justice, Child Support Accounting Unit, P.O. Box 14506, Salem, Oregon, 97309. Co-Petitioners request that collection, accounting, disbursement, and enforcement services be provided through the Department of Justice. (Required if child support is paid through the state.)

Withholding.

If child support is also ordered in this case and if enforcement services are provided through the State of Oregon's Department of Justice, the spousal support order should be enforceable by income withholding under ORS 25.378.

OR

(b) Directly into _____'s checking or savings account. A receipt of deposit should be kept by the paying spouse/domestic partner as proof of payment. The spouse/domestic partner receiving support should provide the paying spouse/domestic partner with current deposit slips and/or bank name, account name, and account number.

The terms for Life Insurance indicated below should be in effect:

B. Life Insurance.

Co-Petitioner _____ should buy and maintain life insurance for the benefit of Co-Petitioner _____ throughout the period of the spousal support obligation, in the amount of \$ _____.

///
///
///

14. Real Property.

- Neither Co-Petitioner has any interest in any real property located in this or any other state.
- Co-Petitioner _____ Both Co-Petitioners has/have an interest in real property located at the address of: _____
- This property should be distributed as follows: _____

- Additional page labeled "Paragraph 14 - Real Property continued" attached.
 - The legal description of the property is attached as Exhibit _ and is incorporated in this petition.
 - Distribution of this property is not within the jurisdiction of this court.

15. Personal Property (including motor vehicles).

- Co-Petitioners have divided between them all personal effects, household goods, and other personal property they own separately or together, and neither should claim those items now in possession of the other.
- Co-Petitioner _____ should be awarded the following personal property: _____

- Additional page labeled "Paragraph 15 - (*write name*) _____'s Personal Property Distribution continued" attached.

Co-Petitioner, (*write name*) _____ should be awarded his/her retirement benefits, pension plan, profit-sharing plan, deferred-compensation plan, and/or stock option plan held by his/her employer, free of any interest in the spouse/domestic partner.

Co-Petitioner, (*write name*) _____ should be awarded the following personal property: _____

- Additional page labeled "Paragraph 15 - (*write name*) _____'s Personal Property Distribution continued" attached.

Co-Petitioner, (*write name*) _____ should be awarded his/her retirement benefits, pension plan, profit-sharing plan, deferred-compensation plan, and/or stock option plan held by his/her employer, free of any interest in the spouse/domestic partner.

16. Distribution of Debts.

- There are no outstanding debts of this marriage/domestic partnership.
- The debts should be paid as follows:

Name of Creditor (who debt is owed to)	What debt is for	Amount	Who should pay (write names)

- Additional page attached, labeled, "paragraph 16 continued".

Each spouse/domestic partner should be responsible for the payment of all debts incurred by him/her individually since the date of their separation; all debts which are distributed to him/her by the court; and all debts which are secured by property distributed to that spouse/domestic partner. Also, if any creditor asks the spouse/domestic partner not responsible for a debt to pay all or a portion of it, and s/he does so, the spouse/domestic partner responsible for that debt should reimburse the other spouse/domestic partner for any monies s/he paid to the creditor after the date of the judgment. **Date of Separation:** _____.

17. Transfer of Debts and Property.

Within 30 days of the date of judgment, each party should execute, acknowledge, and deliver whatever documents are necessary to accomplish the distribution of debts and property ordered by the court. The judgment should operate to convey title to the spouse/domestic partner awarded the property if the other spouse/domestic partner fails to comply with this requirement.

18. Former Name.

_____'s former name of _____ should be restored.

19. 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 child/ren _____ for the following reasons: _____

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

	Petitioner	Respondent
Full Name		
Former Legal Name(s)	Do not list. List separately on CIF.	Do not list. List separately on CIF.
Age		
Address or Contact Address		
Telephone Number		
Social Security Number	Do not list. List separately on CIF.	Do not list. List separately on CIF.
Driver License Number	Do not list. List separately on CIF.	Do not list. List separately on CIF.
Employer Name, Address and Telephone	Do not list. List separately on CIF.	Do not list. List separately on CIF.

20. 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: Co-Petitioner (write name) _____

Both parties equally

Other: _____

///
///
///
///

B. Costs and Fees Paid by the Parties

- Each party should be responsible for paying his/her own court costs and service fees for this case.
- To be paid by both parties equally
- Co-Petitioner, (*write name*) _____ should reimburse the other party for his/her court costs and service fees for this case.
- Other: _____

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

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:

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

WHEREFORE, Co-Petitioners request a Judgment granting the relief asked for above, and other equitable relief that the Court thinks is just.

STATE OF _____)
County of _____)

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

Co-Petitioner (signature) Print Name

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

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

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

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

Co-Petitioner (signature) Print Name

Address or Contact Address City, State, Zip Code 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.

_____ Co-Petitioner (signature)