

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

In the Matter of the Marriage of:)
)
_____,) Case No. _____
Petitioner,)
)
and) CORRECTED SUPPLEMENTAL JUDGMENT
) CORRECTING JUDGMENT OR MONEY
) AWARD (ORCP 71A)
_____,)
Respondent.)

1. This matter came before the court:

- a. On the Motion of Petitioner Respondent the State of Oregon;
- b. On the court's own motion;
- c. On the stipulation of the parties, as shown by the signatures below
- d. At a hearing held _____ (date), at which the following persons were present:
 - Petitioner Petitioner's Attorney _____
 - Respondent Respondent's Attorney _____
 - Other: _____

2. Findings. The court considered the: Documents on file herein; Stipulations; Evidence presented and found that

a. Due to a clerical mistake, the _____ (title of document) entered on _____ (date) should be corrected to accurately reflect the court's ruling.

IT IS HEREBY ORDERED that the above-described judgment shall be corrected as set forth below. The judgment document is not otherwise modified and all other terms remain in full force and effect.

- 1. The body of the judgment should be corrected to read (*attach additional pages if necessary*): _____

(Additional pages labeled "Paragraph 1 - Corrections to Body of Judgment" attached.)

2. **Money Award.** Child Support Obligation included not included.

Spousal Support included not included.

Additional information	PETITIONER	RESPONDENT
Full Name		
Address or Contact Address		
Attorney's Name, Number and Address		
Year of Birth		
Last Four Digits of Driver License Number and State of Issuance		
Last Four Digits of the Support Obligor's Social Security Number		

The following information is to be provided by any party entitled to receive a money award (a "judgment creditor") as listed in this Judgment.

Others Entitled to Portions of Judgment Payable to PETITIONER	The following person(s) or public bod(ies) are known by Petitioner to be entitled to a portion of a payment made on the judgment (other than Petitioner's attorney): <input type="checkbox"/> None or <input type="checkbox"/> _____ _____
Others Entitled to Portions of Judgment Payable to RESPONDENT	The following person(s) or public bod(ies) are known by Respondent to be entitled to a portion of a payment made on the judgment (other than the Respondent's attorney): <input type="checkbox"/> None or <input type="checkbox"/> _____ _____

Type of Judgment		Amount of Judgment
Child Support Award	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____ <input type="checkbox"/> per month, of which \$ _____ is cash medical support. Starting on <input type="checkbox"/> the first day of the month following the date of the judgment, or (date) _____, and continuing per the terms of paragraph 4 of this judgment. Nine percent (9%) per annum simple interest will accrue on any unpaid installments as they become due.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

Spousal Support Award	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$_____ per month starting on <input type="checkbox"/> the first of the month following the date of the judgment, or (date)_____, lasting until (date)_____, or the death of either party, whichever comes first; or 1. A lump sum payment of \$_____ to be paid by (date): Nine percent (9%) per annum simple interest will accrue on any unpaid installments as they become due.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

SPOUSAL SUPPORT PAYMENTS ARE TAXABLE TO THE OBLIGEE SPOUSE AND DEDUCTIBLE TO THE OBLIGOR SPOUSE. ALL PAYMENTS TERMINATE UPON THE DEATH OF EITHER PARTY.

Property Division (if applicable)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$_____ per month. Starting on <input type="checkbox"/> the first day of the month following the date of the judgment, or (date)_____, lasting until (date)_____, or the death of either party, whichever comes first; or 2. A lump sum payment of \$_____ to be paid by (date): Nine percent (9%) per annum simple interest will accrue on any unpaid installments as they become due.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

Prejudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$_____
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

Postjudgment Interest (Note: ORS 21.607(1) disallows interest on fees that have been deferred.)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> 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.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

Accrued Arrears (if any, on judgments to be paid on a periodic basis)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	1. \$_____ per month, starting on the <input type="checkbox"/> first day or <input type="checkbox"/> 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).
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Costs and Service Expenses (e.g., filing fees, hearing fees, trial fees, process fees)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____
	WHO RECEIVES <input type="checkbox"/> State of Oregon <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Attorneys Fees (if any)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> 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: _____

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_____.

Submitted by:

 Petitioner Respondent, State of Oregon, Signature

Print Name

Address or Contact Address

City, State, Zip

Telephone or Contact Telephone

I certify that this is a true copy:

 Petitioner Respondent, State of Oregon, Signature