

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

Case No: _____

and

Petitioner
Respondent

**EX PARTE MOTION FOR
ORDER TO SHOW CAUSE
RE: JUDGMENT MODIFICATION
and DECLARATION IN SUPPORT**

and

Unmarried children 18, 19, or 20 years old (per ORS 107.108) (full names)

➤ I need an interpreter: Spanish Russian other: _____

Motion

I am the Petitioner Respondent in this case. I ask the court to issue an *Order to Show Cause* requiring the other party to appear and show cause why this court should not modify (change) the provisions of a prior judgment related to (check all that apply):

- Spousal/Partner Support
- Custody
- Parenting Time
- Child Support
- Other: _____

The judgment I want to modify is (court or agency, case number, name of judgment and date)_____

Court Costs and Fees (whether paid or deferred) related to this motion

- Each party should be responsible for paying his or her own costs and fees
- Costs and fees should be paid by both parties equally
- Respondent Petitioner should reimburse the other party for costs and fees paid
- Other: _____

Statement of Points and Authorities

ORS 107.135(1)(a) allows the court to modify custody, parenting time, and support terms in a judgment of dissolution, annulment, or separation.

ORS 107.431 allows the court to set aside, alter, or modify parenting time and to terminate or modify child support if parenting time is being denied.

ORS 106.340(3) extends all legal rights and obligations of spouses pertaining to a child of either party to registered domestic partners.

ORS 109.103(1) extends all provisions of ORS 107.135 to unmarried parents.

Declaration

The other party is not in active military service of the United States and is not incapacitated, a minor, a protected person, or a respondent (as defined by ORS 125.005)

Other (*explain*): _____

Spousal/Partner Support:

Spousal/Partner support should be changed to (*explain the changes you want*) _____

Because (*specifically describe substantial change in circumstances*) _____

Effective date - The new support order should be effective as of the date this *Motion* is served on the other party (*or*) Other: _____

Children

The following children are affected by this request (*names and ages of children*) _____

Custody and Parenting Time

1. UCCJEA Information (Uniform Child Custody Jurisdiction and Enforcement Act)

This court has jurisdiction to modify custody, or parenting time under the UCCJEA (ORS 107.741 – 107.751) because

An Oregon court made the original order and the children (or at least one parent) still live in Oregon.

Other reason (*explain*) _____

1A. List the places where the named children have lived in the last five years, the names of the people they lived with at that time, and the *current* contact addresses for those people.

Dates From/To	County, State	Name of Parent/Caretaker	Contact Address of Parent/Caretaker	Which Children

Additional page attached; see section titled "Section 1A-UCCJEA."

1B. Other than the judgment I want to modify,

I **have not** participated in any legal case about the custody or parenting time of the named children in any state, **or**

I **have** participated in the following litigation:

Name of Court	State	Case No.	Date of final decision	Result <i>(include names of affected children)</i>

Additional page attached; see section titled "Section 1B-UCCJEA."

1C. I do not know of any other proceeding that may affect the outcome of this case, including enforcement of domestic violence or protective orders, adoption, **or** termination of parental rights involving any of the children pending in any state

Except for: _____
(identify court, case number and the kind of proceeding)

1D. I do not know any person besides the other parent who has physical custody of the children or who claims to have custody, visitation or parenting time rights, **or**

Except for *(list name and address)*: _____

2. A change in custody or parenting time is in the **best interest** of the children because:
(explain in detail) _____

Additional page attached; see section titled "Section 2-Best Interests."

2A. **Custody** should be changed as follows:
 Petitioner Respondent should have sole custody of (*names and years of birth*) _____

Parties have agreed to joint custody of (*names*) _____

Modification of **custody** is appropriate because circumstances have changed significantly since the prior judgment: (*explain in detail*) _____

Additional page attached; see section titled "Section 2a-Circumstances."

2B. **Parenting Time** should be changed as follows: (*check all that apply*)

According to the attached Parenting Plan labeled Exhibit 1 **or**

As follows: _____

Parenting time should be supervised by: _____

Cost of supervision should be paid by:

Petitioner Respondent Other _____

Other terms: _____

Petitioner Respondent should not have parenting time because it would endanger the health or safety of the children: (*state supporting facts*) _____

Additional page attached; see section titled "Section 2B-Endangerment."

3. Relocation Petitioner Respondent should be allowed to move more than 60 miles further distant from the other party without advance written notice because good cause exists (*explain*) _____

4. Contact Information - Petitioner Respondent **should not** be required to provide contact information to the other party because (*explain*): _____

Child Support and Medical

You must also file a *Certificate re: Pending Child Support Proceeding and/or Existing Child Support Order*.

Pending Child Support Cases

- No other child support case is pending in any state.
 Another child support case is pending in another court or agency (*details in included Certificate*).

Existing Child Support Cases

- No other child support orders or judgments exist (besides the order I want to modify).
 Another child support order or judgment exists (besides the order I want to modify) (*details in included Certificate*).

1. Child support should be **terminated** (stopped) based on the change of custody requested above, **or**
 Other reason: (*explain*) _____

2. Child support should be **changed** as follows based on the requested change of custody or substantially changed circumstances: (*explain*) _____

2A. Child Support (*including Cash Medical Support, see instructions*) **is presumed to be unavailable** because the parent who would pay (*check all that apply*):

Receives cash payments from a **public assistance** program including TANF or SSI.

Is (or is expected to be) **incarcerated** (in jail or prison for at least 6 months) and has income less than \$200 per month.

Support should be ordered despite the presumption because (*explain why and complete the section below*): _____

2B. Support should be ordered payable:

by Petitioner Respondent

to Petitioner Respondent Adult Child Attending School: _____

on the first *or* _____ day of each month,

beginning the month following entry of this judgment *or* the date of service of this *Motion*.

2C. The total monthly amount should be \$_____, which is (*check one*):

The amount presumed correct under the Oregon child support guidelines, worksheets are included with this *Motion (or)*

Different from the amount presumed correct by the child support guidelines because the guideline amount would be unjust or inappropriate (*explain*)_____

3. Payment – I understand that payments will be made by income withholding, unless an exception applies (*check appropriate box in 3A if exception applies, otherwise, skip to section 3B*).

3A. I request an exception to the income withholding requirement of ORS 25.378 so that payment can be made another way because good cause exists.

Petitioner and Respondent have agreed in writing to the following alternative payment method: (*explain*)_____

Other exception under ORS 25.396: (*explain*)_____

3B. Payment should be made to (*check one*):

All support payments should be made to the Department of Justice, Child Support Accounting Unit, P.O. Box 14506, Salem, Oregon, 97309

or

An exception to income withholding applies as noted above. All support payments should be made to the recipient’s checking or savings account. The receiving parent should be ordered to provide the paying parent with current deposit slips or bank name, account name, and account number.

or

Other (*explain*)_____

(*only available if you request an exception to income withholding, above*).

3C. Adult Child Attending School

Support for an **adult child attending school** as defined by ORS 107.108 should be distributed by the Department of Justice directly to the child.

or

Good cause exists to pay support for an adult child attending school to the:

Petitioner Respondent and NOT to the child: (*explain*)_____

4. Length of Child Support – Unless the child becomes self-supporting, emancipated, or married:

- The support requested above for each child should continue until the child reaches eighteen (18) years of age.
- The support requested above for each child should continue until the child reaches age 21 if the child qualifies for support as a child attending school as defined by Oregon Law.

5. Medical

- The original judgment provided for medical costs **and**
 - That order should NOT be changed (*skip to section 6*).
 - That order should be changed as follows: (*complete the sections below*)
- The original judgment did NOT provide for medical costs (*complete sections below*).

5A. Private Health Insurance:

- Is** appropriate and available to (*check one or both*) Petitioner Respondent **and**
 - Both parents have agreed to provide coverage, **or**
 - Petitioner Respondent should be ordered to keep insurance throughout the period of the child support obligation.

- Is not** appropriate or available to either parent.

The parent awarded custody should enroll the children in public health insurance until private health insurance becomes available. The first parent with access to appropriate private health insurance for the children should be ordered to provide it.

Cash Medical Support

(If no private health insurance is available to either parent, then the parent who is ordered to pay child support will also be ordered to pay cash medical support according to the Child Support Guidelines, unless the court finds reason not to).

Cash Medical Support should not be ordered because:

- One of the parents provides **private** health care coverage.
- Support is presumed to be unavailable for the reason marked in Section 2A, above. (*Note: if you asked that support be awarded anyway, do not mark this box*).
- The parent paying child support has income at or below Oregon's minimum wage for full-time employment, so cash medical support should not be ordered
- The children's medical needs will be met by the *Uninsured Medical Expenses* provision below.
- Other (*explain*): _____

5B. Uninsured Medical Expenses

Any previous provision for sharing of uninsured medical expenses should be terminated (stopped).

or

Petitioner should pay _____% and Respondent should pay _____% of the unreimbursed costs of the children’s reasonable medical, dental, and vision care. This does not include ordinary expenses like nonprescription medication, bandages, vitamins, and copays for regular checkups, which the parents are presumed to provide for the children in proportion to their parenting time. This obligation is in addition to any child support **and** will be **offset** by any cash medical support ordered above.

or

This obligation should be **in addition** to any child support and cash medical support ordered above.

6. Life Insurance for the Children

The party paying support should carry life insurance on his/her life for the benefit of the parties’ children throughout the period of the support obligation. The coverage should be in the amount of \$_____

or

Any previous provision for life insurance should be terminated (stopped).

Certificate of Document Preparation. Check all that apply:

- I chose this form for myself and completed it without paid help
- A legal help organization helped me choose or complete this form, but I did not pay money to anyone
- I paid(or will pay) _____ for help choosing, completing, or reviewing this form

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

Date

Signature

Name (printed)

Contact Address

City / State / ZIP

Contact Phone