

IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR CLACKAMAS COUNTY
Small Claims Department

Name

Address

City

ST

Zip

Phone

E-mail

I am the Plaintiff Defendant

Attorney for: Plaintiff Defendant

Attorney Oregon Bar Number

CASE NO. _____

Plaintiff(s),

v.

**WAIVER OF RIGHTS UNDER THE
SERVICEMEMBERS CIVIL RELIEF ACT**

Defendant(s).

By and through my legal representative (attorney or person with power of attorney, check here if you are appearing for the service member).

I say as follows:

(1) I understand that:

- I have the right to request a stay of proceedings under 50 U.S.C. App. Section 517, Servicemembers Civil Relief Act;
- if a stay is granted, nothing will happen in this case until the stay is vacated; and
- a stay will be granted if the judge decides that my military service materially affects my ability to appear.

(2) I voluntarily waive and give up the right to stay this case. I want to proceed with this case.

(3) This waiver is made during my period of military service.

I have not included any non-public information in this document.

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 subject to penalty for perjury.

Date

Signature

Print Name