

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

In the Matter of: _____)

Petitioner, Co-Petitioner,)
and)

_____,)
 Respondent, Co-Petitioner.)

Case No. _____

PETITIONER'S
 RESPONDENT'S AFFIDAVIT IN SUPPORT
OF MOTION FOR ORDER ALLOWING
JUDGMENT ON AFFIDAVIT IN LIEU OF HEARING
(With Children)

STATE OF _____)

County of _____)

) ss.

I, _____, being first duly sworn, say: I am the Petitioner

Respondent in this proceeding.

An Order of Default and Entry of Judgment by Default has been entered in this court on _____
_____ (or)

Respondent appeared, but has waived the right to further appearance (or)

The parties have stipulated to the entry of judgment as indicated by their notarized signatures below.

Child support or spousal support is involved:

Petitioner's (write name) _____'s average gross monthly income is
approximately \$_____.

Respondent's (write name) _____'s average gross monthly
income is approximately \$_____.

The current residence of the minor child/ren is:

Name of Child	Resides With (Name, Address or Contact Address)	For how long

Pursuant to ORS 107.095, Petitioner Respondent request/s that this Court grant an Order allowing entry of judgment in lieu of a hearing.

 Petitioner Signature

 Respondent Signature

**PETITIONER'S RESPONDENT'S AFFIDAVIT IN SUPPORT OF MOTION FOR ORDER
ALLOWING JUDGMENT ON AFFIDAVIT IN LIEU OF HEARING - Page 1 of 2**

STATE OF _____
County of _____

 Petitioner Signature

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

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

 Respondent Signature

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

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 document.

DATED this _____ day of _____, 20_____.

Submitted by:

 Petitioner Respondent, Signature

Print Name

Address or Contact Address

City, State, Zip

Telephone or Contact Telephone

I certify this is a true copy

 Petitioner's Respondent's, Signature

PETITIONER'S RESPONDENT'S AFFIDAVIT IN SUPPORT OF MOTION FOR ORDER
ALLOWING JUDGMENT ON AFFIDAVIT IN LIEU OF HEARING - Page 2 of 2