



The name/s and year(s) of birth of the minor child/ren that should be protected by this order are:

NAME

YEAR OF BIRTH

_____	_____
_____	_____
_____	_____
_____	_____

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Circuit Court Judge

\_\_\_\_\_  
Print Name

**NOTICE**

**You may request a hearing on this order as long as it remains in effect by filing with the court a [hearing request in the form described in ORS 107.097 (5)] request for a hearing. In the request you must tell the court and the other party that you object to the order on the ground that the child was not in immediate danger at the time the order was issued. In the request, you must also inform the court of your telephone number or contact number and your current residence, mailing or contact address.**

**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.

\_\_\_\_\_  
 Petitioner  Respondent, Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address or Contact Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone or Contact Telephone

**I certify that this is a true copy:** \_\_\_\_\_

Petitioner  Respondent, Signature