

IN THE CIRCUIT COURT OF THE STATE OF OREGON

FOR THE COUNTY OF _____

In the Matter of the Marriage of:)
)
_____,)
Petitioner,)
and)
_____,)
Respondent.)

Case No. _____

PETITIONER'S RESPONDENT'S
AFFIDAVIT RESPONDING TO
EX PARTE MOTION FOR ORDER TO
SHOW CAUSE RE: CONTEMPT

1. I, Petitioner Respondent, being first duly sworn, appear and say that the following is true. In response to the motion that has been filed, I (*mark those that apply*):

a. agree with the requested relief contained in the Ex Parte Motion for Order to Show Cause Re: Contempt filed in this case, except as follows: _____

b. disagree with the relief requested in Petitioner's Respondent's Ex Parte Motion for Order to Show Cause for Contempt as follows: (*Check the appropriate boxes below*):

i. Payment of money sufficient to compensate the Petitioner Respondent for any loss, injury or costs suffered as the result of contempt of court in the amount of \$_____

Explain why you disagree: _____

ii. Payment of an amount not to exceed \$500 or one percent of the Petitioner's Respondent's annual gross income, whichever is greater, for each day the contempt of court continues. Explain why you disagree: _____

iii. An order designed to insure compliance with a prior order of the court.

Explain why you disagree: _____

iv. Payment of all or part of attorney fees incurred by a party as the result of a contempt of court in the amount of: \$_____. Explain why you disagree:_____

v. Other:_____

Explain why you disagree:_____

vi. Other: _____

2. I was unable to comply with the terms of the order or judgment because: _____

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_____.

Signature Print Name

Address or Contact Address City, State, Zip Telephone or Contact Telephone

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

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

I certify that this is a true copy:

 Petitioner Respondent, Signature