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IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

_____	)	Case No. _____
Petitioner,	)	
	)	____ Petitioner's
vs.	)	____ Respondent's
	)	CERTIFICATE OF DOCUMENT
_____	)	PREPARATION
Respondent.	)	(Family Abuse Prevention Act)
	)	

(If you completed the document(s) you are filing with the court without the assistance of an attorney, you are required to complete truthfully this certificate.) Check or complete all blanks that apply:

\_\_\_\_\_ I selected the attached form(s) / document(s) for myself, and I completed it/them without paid assistance.

\_\_\_\_\_ I paid, or will pay, money to \_\_\_\_\_ for assistance in preparing the attached form(s) / document(s).

\_\_\_\_\_ Other. (See instructions) Name: \_\_\_\_\_

Documents: \_\_\_\_\_

\_\_\_\_\_

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Signature Date

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Print or Type Name

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Address or Contact Address

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City State Zip

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Telephone or Contact Telephone Number(s)

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