

1 **IN THE CIRCUIT COURT OF THE STATE OF OREGON**
2 **FOR THE COUNTY OF _____**

3 In the Matter of:

4 _____
5 Petitioner,

6 vs.

7 _____
8 Respondent.

CASE NO. _____

**NOTICE THAT CUSTODY AND / OR
PARENTING TIME IS DISPUTED
AND ORDER REFERRING CASE
TO MEDIATION AND PARENTING
EDUCATION**

9 **NOTICE**

10 I, _____, (check one: Petitioner, Respondent, Attorney)
11 hereby serve notice that the parties cannot agree upon custody and/or parenting time. I, therefore, file this
12 notice that custody and/or parenting time is a matter of dispute as required by Chapter 12 of the Local
13 Court Rules.

14 Date Signed: _____

15 Check one:
16 Petitioner, Attorney for Petitioner
17 Respondent, Attorney for Respondent)

Signature of Person Filing Notice

Printed Name of Person Filing Notice

18 **ORDER**

19 IT IS HEREBY ORDERED that the parties indicated as Petitioner and Respondent in this case are
20 referred to MEDIATION.

21 Date Signed: _____

Signature of Judge

Printed Name of Judge

24 To comply with this Order, contact the Mediation Coordinator at 541-278-5486 to register for this
25 Parenting Education and to notify the Program of your mediator choice no later than fifteen (15) days after
26 receipt of this Order. If both parties cannot agree on a mediator, the Mediation Coordinator will choose a
27 mediator for the case.

28 COPIES OF THIS ORDER provided to Petitioner, Respondent and Attorneys (if any.)

THIS IS A MANDATORY COURT APPEARANCE

CERTIFICATE OF SERVICE

I hereby certify that I served the foregoing:

on: _____

by the following indicated method(s):

- by mailing a full, true, and correct copy in a sealed postage prepaid envelope deposited with the United States Postal Service to the above named person at the last known address on the date indicated below.
- by causing a full, true and correct copy to be hand-delivered to the above named person at the last known address on the date indicated below.
- by sending a full, true, and correct copy via overnight courier in a sealed postage prepaid envelope to the above named person at the last known address on the date indicated below.
- by faxing a full, true and correct copy to the above named person at the fax number indicated above on the date indicated below. The fax machine was operating at the time of service and the transmission was properly completed.

Date Signed: _____

Signature of Party Certifying Service

Petitioner Respondent

Printed Name of Party Certifying Service