

3. I want to change PARENTING TIME (visitation) because I believe the change is in the best interest of my child/ren. The change of circumstances and specific reason(s) I want the change and believe the change would be best for my children are: _____

Additional page labeled "paragraph 3 continued" attached.

4. I want to change CHILD SUPPORT because of a change of circumstances since the last support order. The change of circumstances is: _____

5. I want to change SPOUSAL SUPPORT because of a change of circumstances since the last support order. The change of circumstances is as follows: _____

6. I want to change HEALTH CARE COVERAGE because: _____

7. I want to change ADDITIONAL PROVISIONS because: _____

8. UCCJEA Information.

a. Check the appropriate box below ONLY IF Oregon is the state that issued the order or judgment sought to be modified:

The child/ren has/have continuously resided in Oregon for six months before this case was filed; **OR**

Other basis for Oregon jurisdiction: _____

b. Check the appropriate box below ONLY IF Oregon is NOT the state that issued the order or judgment sought to be modified:

Neither the child/ren nor the parents presently reside in _____ (name the state that issued the order or judgment sought to be modified, if not Oregon).

Other basis for Oregon jurisdiction: _____

List the county and state where the minor child/ren of the parties have lived in the last five years, the names of the people they lived with at that time and the **CURRENT** contact address of those people.

Dates From/To	County, State	Parent(s)/Caretaker	CURRENT Contact Address of Parent/Caretaker	Which Children

Additional page attached; see section labeled “paragraph 8 continued.”

I have have not participated in any litigation concerning the custody, visitation, parenting time or placement of the child/ren in this or any other state. I have participated in the following litigation:

Name of Court	State	Case No.	Date	Result

9. I do not know of any other domestic violence, custody, visitation, parenting time or placement proceeding involving the child/ren, or of any other agency proceeding or court case which could affect this case, previously filed or currently pending in this or any other state except for: *(identify agency or court, case number, date filed, and kind of proceeding)* _____

10. I do not know any person other than the other parent who has physical custody of the child/ren or who claims to have custody, visitation or parenting time rights except for: *(list name and 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.

<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent, Signature	Print Name
<hr/>		
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.
(do not sign this line on the original)

 Petitioner Respondent, Signature