

TO PETITIONER AND RESPONDENT:

NOTICE OF EXCEPTIONAL CIRCUMSTANCES HEARING:

The court has scheduled an exceptional circumstances hearing about the temporary custody of your child/ren, on:

Date: _____ Time: _____ Courtroom: _____

See below for information about the "Exceptional Circumstances" hearing.

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF WASHINGTON

_____	<u>See CIF</u>)	Case No. _____
Petitioner (your full name)	(date of birth))	
)	
)	NOTICE TO RESPONDENT/
v.)	REQUEST FOR HEARING
)	(Family Abuse Prevention Act)
)	
_____	<u>See CIF</u>)	
Respondent	(date of birth))	
(full name of person to be restrained))	

THIS FORM MUST BE ATTACHED TO ALL COPIES OF THE RESTRAINING ORDER

TO RESPONDENT: A RESTRAINING ORDER HAS BEEN ISSUED BY THE COURT WHICH AFFECTS YOUR RIGHTS. THIS ORDER IS NOW IN EFFECT. You have the right to contest this Restraining Order as set out in the paragraph(s) checked below.

An "Exceptional Circumstance" Hearing Has Been Scheduled. *(This means that the box on the top of this page, "Notice of "Exceptional Circumstances" Hearing," has been filled out.)*

The court has determined that there are exceptional circumstances affecting your child/ren and has ordered a hearing to be held on the issue of temporary custody. If you wish to be heard on the issue of temporary custody, you must appear at the date and time stated in the box above. If you disagree with any of the OTHER TERMS of the Restraining Order, you must also appear at the time and place specified above. This will be your only chance to do so. If you do not go to the hearing, the Restraining Order may be upheld (continued) and all matters decided against you. If you want an earlier hearing date than the date specified above, you must complete the request for hearing form below and mail or deliver it to the address on Page 2.

- An “Exceptional Circumstances” Hearing Has NOT Been Scheduled.** *(This means that the box on the top of page 1 is BLANK.)* If you want to contest (object to) the terms of this order, including the award of temporary custody to Petitioner, you must complete the attached “REQUEST FOR HEARING” form (on Pages 3 and 4) and mail or deliver it to the address on the bottom of this page.

A REQUEST FOR HEARING must be made within 30 days after you receive the order. You must include your address and telephone number with your request for a hearing. The hearing will be held within 21 days, or within 5 days if you are contesting a temporary custody provision (not parenting time). At the hearing, a judge will decide whether the order should be canceled, changed, or continued. **If you do not go to the hearing, the restraining order may be upheld (continued) and all matters decided against you.**

If no hearing date has been set already and you do not request a hearing within 30 days after you receive this Restraining Order, this restraining order will continue in effect as issued.

Enforceability of the Restraining Order

The Restraining Order you have received is in effect and remains in effect until the court modifies or dismisses it or until it expires. The order may also be renewed upon a finding that a person in the Petitioner’s situation would reasonably fear further acts of abuse by you if the order is not renewed. If you are arrested for violating this order, the security amount (bail) is \$50,000, unless a different amount is ordered by the court.

This Restraining Order, or any Order continuing or changing this Order, is enforceable in every county in Oregon. It is also enforceable in all 50 states, the District of Columbia, tribal lands and territories of the United States.

Violation of the Restraining Order

Violation of any part of this restraining order, or any order continuing or changing this order, constitutes contempt of court, punishable by a fine of up to \$500 or one percent of your annual gross income, whichever is greater, or a jail term of up to six months, or both. Other consequences may also be imposed for contempt.

Federal Restrictions

FIREARMS PROHIBITIONS MAY APPLY TO YOU!

As a result of this Order, or any Order continuing or changing this Order, it may be unlawful for you to possess or purchase a firearm, including, a rifle, pistol, or revolver, or ammunition pursuant to federal law under 18 U.S.C. § 922(g), as well as state and local law. If you have any questions whether these laws make it illegal for you to possess or purchase a firearm, you should consult an attorney.

You may also be subject to further restrictions and prohibited from:

- Traveling across state lines or tribal land lines with the intent to violate this Order and then violating this Order.
- Causing the Petitioner to cross state lines or tribal land lines for the purpose of violating the order
- Possessing, receiving, shipping or transporting any firearm or firearm ammunition.

Other Laws May Also Apply To You

Whether or not a Restraining Order is in effect, federal law may prohibit you from:

- Traveling across state lines or tribal land lines with the intent to injure the Petitioner and then intentionally committing a crime of violence causing bodily injury to the Petitioner.
- Causing the Petitioner to travel across state lines or tribal land lines if your intent is to cause bodily injury to the Petitioner or if the travel results in your causing bodily injury to the Petitioner.

IF YOU COMPLETE THE REQUEST FOR HEARING FORM, YOU MUST MAIL OR DELIVER IT TO: Washington County Circuit Court, 150 North First Avenue, Hillsboro, OR 97124.

I will will not be represented by an attorney at the hearing. The name and Bar Number of the attorney (if known) are: _____

I will need _____ language interpretation services at the hearing.

I will need American's with Disabilities Act accommodations at the hearing.

Notice of the time and place of the hearing can be mailed to me at the address below.

Respondent's Signature

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 below:

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.

Submitted by:

Print Name, Respondent Attorney for Respondent

OSB No. (if applicable)

Address or Contact Address
Use a **Safe** Contact address

City, State, Zip

Telephone or Contact Telephone Number
Use a **Safe** Contact number