

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA  
230 Strand Street, St. Helens Oregon, 97051

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## CONTEMPT

### Instructions for Packet 19 (for both the Requesting and Responding Parties)

#### Notice about these instructions and forms.

*These instructions are not a complete statement of the law. They cover basic procedure for uncomplicated family law cases. For legal information, please talk to a lawyer or visit your local law library.*

*The instructions may refer to some forms not included in this packet. If you have a question about a form you cannot locate, you should consult your local court which may have the form available.*

**IMPORTANT:** Check with your local court or your court's family law facilitator to make sure you have followed the procedures and used the correct forms for your court. Many courts have their own forms and rules. Information about how to contact your local court may be found at the Oregon Judicial Department website: <http://www.courts.oregon.gov>.

#### GENERAL INFORMATION ABOUT THESE FORMS

These contempt forms may be used when one party has failed to comply with (obey) an order or judgment by the court. They are for "remedial" sanctions only - "punitive" sanctions may only be requested by certain authorized attorneys. Remedial sanctions that you can request against the uncooperative party are listed in Paragraph 7 of the EX PARTE MOTION FOR ORDER TO SHOW CAUSE FOR CONTEMPT form.

**IMPORTANT** - These forms do **not** allow you to ask the court to put the other party in jail for violating the order or judgment. If this is a sanction you want to request, you will most likely need the assistance of an attorney.

**IMPORTANT** - To get a judgment for contempt and sanctions imposed against the other party, you must file your motion **within two years** of the date when the other party failed to comply with (obey) the order or judgment at issue. If you file after more than two years, the court will not be able to award a judgment of contempt or impose sanctions against the other party.

**IMPORTANT** - These forms are NOT meant to be used to enforce child support awards or custody or parenting time orders. However, they may be used to enforce spousal support awards. If you have child support enforcement issues and are receiving services through the Oregon Division of Child Support, you should contact it by calling their 24 hour information hotline (800) 850-0228 inside Oregon, (503) 378-5567 outside Oregon, or on the Internet at <http://www.dcs.state.or.us>. If you have custody, or parenting time enforcement issues, you will need to either contact an attorney or use forms similar to those in Packet 5 on the Oregon Judicial Department's Family Law website (<http://www.courts.oregon.gov/familylaw>).

#### **IF YOU ARE THE REQUESTING PARTY:**

##### STEP ONE - Filling Out the Forms

- Fill out the EX PARTE MOTION FOR ORDER TO SHOW CAUSE RE: CONTEMPT (MOTION) form. The party submitting the MOTION and AFFIDAVIT will be the Petitioner. (Please note that the case headings for this proceeding may **not** be the same as your original petition that started the divorce, separation, or other family law case.) When filling out Paragraph 6 (Relief Requested), you will need to

select the maximum sanction that you wish the court to order against the other party. The relief that you ask for in the MOTION cannot be changed later in the process so be careful in choosing what sanction(s) you ask the court to order against the other party. If you change your mind and want to change the type of sanction(s) you have asked for, you will have to file a new motion and re-serve it on the other party. Sign the copy of the MOTION that will be served at the bottom where it says "I certify that this is a true copy." Do not sign this line on the original form or on your own copy, just on the copies that are served on the other party.

- After filling out the MOTION you will need to fill out the AFFIDAVIT SUPPORTING EX PARTE MOTION FOR ORDER TO SHOW CAUSE RE: CONTEMPT (AFFIDAVIT). Check with your local court to find out how much it will cost to file the MOTION, AFFIDAVIT, and ORDER.

### **STEP TWO - Filing and Serving the Motion**

- File the MOTION, AFFIDAVIT, and ORDER TO SHOW CAUSE RE: CONTEMPT (ORDER) with the court. After the judge has signed the ORDER, a "true copy" of the MOTION, AFFIDAVIT, and ORDER must be "served" on (personally delivered to) the other party to inform them that the court will hold a hearing and that they have a right to appear and challenge your MOTION. **Important: You cannot serve the other party yourself because you are a party.** You may have service completed by the Sheriff in the county where the other party lives, by a private process server, or by another individual who is a competent person 18 years or older, an Oregon resident (or of the state where service is made), and not a party nor an attorney for a party. A fee for service will typically be charged by the Sheriff's Office or a private process server.

### **STEP THREE - The Hearing and the Judge's Ruling**

- Show up and attend the hearing at the time it is scheduled. Bring the SUPPLEMENTAL JUDGMENT with you to the hearing. During the hearing, the judge may issue a judgment or order of further appearance, depending on the issues involved in your case and whether or not the other party shows up for the hearing. If the other party does not attend the hearing, the court may issue a warrant to compel that party's appearance. At the hearing, the judge will either grant or deny the relief requested in whole or in part.

## **IF YOU ARE THE RESPONDING PARTY:**

### **STEP ONE - Filling Out the Response**

- Fill out the form called "RESPONDENT'S AFFIDAVIT RESPONDING TO EX PARTE MOTION FOR ORDER TO SHOW CAUSE RE: CONTEMPT (RESPONSE).
- If you AGREE with all or part of the requested relief, complete Paragraph 1. If you agree with only part of the requested relief, explain what you disagree with in the portion of Paragraph 1 that begins: "except as follows:\_\_\_\_\_." Do NOT complete Paragraph 2.
- If you DO NOT AGREE with the requested relief, complete Paragraph 2 by marking the same boxes that appear in the other party's MOTION and explaining why you disagree with each request.
- If you were unable to comply with the court's order or judgment, explain why in Paragraph 3.
- Make two copies of your forms. One is for your records and the other is to send to the other party. Sign the copies for the other party where it says "I certify this is a true copy."

## **STEP 2 - Filing and Mailing the Forms**

- File your response with the circuit court. Check with your local court to find out how much it will cost to file the RESPONSE. Mail a copy of your RESPONSE to the other party, or his/her attorney. Fill out the CERTIFICATE OF MAILING form and file it with the court.

## **STEP 3 - The Court's Ruling on the Motion**

- Show up and attend the hearing at the time it is scheduled. During the hearing, the judge may issue a judgment or order of further appearance. **IMPORTANT: If you do not attend the hearing, the court may issue a warrant to compel your appearance.** The judge will either grant or deny the relief requested in whole or in part.

IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR  
THE COUNTY OF COLUMBIA

In the Matter of  the Marriage of: )  
 ) Case No. \_\_\_\_\_  
\_\_\_\_\_, )  
Petitioner, )  
and ) EX PARTE MOTION FOR ORDER  
 ) TO SHOW CAUSE RE: CONTEMPT  
\_\_\_\_\_, )  
Respondent. )

**MOTION**

I, \_\_\_\_\_, request that:

1. The court issue an Order to Show Cause requiring Respondent to appear in the Columbia County Circuit Court, in St. Helens, Oregon to show cause why this court should not grant relief for remedial sanctions for non-compliance with the following order or judgment:

\_\_\_\_\_  
*Title of Order/Judgment* *Date Entered*  
entered by \_\_\_\_\_ Circuit Court.  
*County*

2. As described below, the Respondent has failed to comply with (obey) the above-described order or judgment and Petitioner seeks remedial sanctions as set forth in Paragraph 5 below.
3. It has been within the other party’s power to obey the court’s order or judgment.
4. Not more than two years have passed since the occurrence of the act or omission that constituted the contempt.

5. REQUIRED DESCRIPTION OF FAILURE TO COMPLY WITH ORDER OR JUDGMENT:  
Respondent failed to comply with the terms of the order or judgment as follows:  
(Explain the acts or behaviors that show how the order or judgment was not obeyed, and provide the dates) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional page attached, labeled “Paragraph 5 continued.”

6. REQUESTED RELIEF (Check all boxes that apply):

Petitioner is seeking the following remedial sanctions as authorized by ORS 33.105:

- a.  Payment of money sufficient to compensate the Petitioner for any loss, injury or costs suffered as the result of contempt of court in the amount of: \$\_\_\_\_\_. Describe the loss, injury or costs suffered in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- b.  Payment of an amount not to exceed \$500 or one percent of the Respondent's annual gross income, whichever is greater, for each day the contempt of court continues.
- c.  An order designed to insure compliance with a prior order of the court. Explain type of order requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- d.  Payment of all or part of attorney fees incurred by Petitioner as the result of Respondent's contempt of court in the amount of: \$\_\_\_\_\_
- e.  Other: \_\_\_\_\_  
\_\_\_\_\_

7.  Respondent has stipulated to the relief requested above, as evidenced by their signature on the attached SUPPLEMENTAL JUDGMENT FOR CONTEMPT.

**Points and Authorities**

ORS 33.015(2)(b) defines "contempt" as the willful disobedience of court orders or judgments. ORS 33.105(1)(a, c-f) allows the court to impose one or more of the following sanctions: payment of a sum of money sufficient to compensate a party for the loss, injury, or costs suffered by the party as the result of contempt; an amount not to exceed \$500 or one percent of the defendant's annual gross income, whichever is greater, for each day the contempt of court continues; an order designed to insure compliance with a prior order of the court; payment of all or part of attorney fees incurred by a party as the result of contempt; and a sanction other than the sanctions specified in (a) to (e) if the court determines that the sanction would be an effective remedy for contempt.

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**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\_\_\_\_\_.

---

Petitioner Signature

Print Name

---

Address or Contact Address

City, State, Zip

Telephone or Contact Telephone

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

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

Case No. \_\_\_\_\_

AFFIDAVIT SUPPORTING EX PARTE  
MOTION FOR ORDER TO SHOW CAUSE  
RE: CONTEMPT

STATE OF OREGON )  
) ss.  
County of \_\_\_\_\_ )

I, \_\_\_\_\_, being first duly sworn, say: I am the Petitioner in this proceeding.

1. Respondent has failed to comply with the following court order or judgment:

\_\_\_\_\_  
*Title of Order/Judgment* *Date Entered*  
entered by \_\_\_\_\_ Circuit Court.  
*County*

2. Respondent failed to comply with the terms of the order or judgment as evidenced by the following actions or behavior: *(Explain and provide dates.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I therefore request the relief set forth in the accompanying Ex Parte Motion for Order to Show Cause Re: Contempt. The allegations in my Motion and Affidavit are true, and it is just and reasonable to grant the relief requested in the proposed Supplemental Judgment.

**AFFIDAVIT SUPPORTING EX PARTE MOTION FOR ORDER TO SHOW CAUSE RE: CONTEMPT**

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**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.

**I hereby declare that the above statements are true and complete to the best of my knowledge and belief. I understand they are made for use in court and I am subject to penalty of perjury.**

Dated: \_\_\_\_\_, 20\_\_\_\_.

---

Petitioner Signature

Print Name

---

Address or Contact Address

City, State, Zip

Telephone or Contact Telephone

SIGNED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_.

---

Notary Public for \_\_\_\_\_/Court Clerk

My Commission Expires: \_\_\_\_\_



IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

In the Matter of  the Marriage of: )  
 )  
 ) Case No. \_\_\_\_\_  
\_\_\_\_\_, )  
 ) Petitioner, )  
 and ) ORDER TO SHOW CAUSE  
 ) FOR CONTEMPT  
\_\_\_\_\_, ) [Personal Appearance Required]  
 )  
 ) Respondent. )

Based upon the Ex Parte Motion and Affidavit of the Petitioner on file herein, the request for an Order to Show Cause is hereby:

- allowed
- denied, because: \_\_\_\_\_

IT IS HEREBY ORDERED that Respondent appear in person before the court, on the date and time listed below at the following location: Columbia County Circuit Court, 230 Strand Street, St. Helens, OR 97051 to show cause why an order should not be entered granting the relief requested in the attached Ex Parte Motion and Affidavit:

Day: \_\_\_\_\_, 20\_\_\_\_  
Time: \_\_\_\_\_  A.M.  P.M.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Circuit Court Judge

\_\_\_\_\_  
Print Name

**Certificate of Readiness for Judicial Signature.** This proposed order is ready for judicial signature under UTCR 5.100 because this order is submitted ex parte as allowed by statute or rule.

**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.

Submitted by:

\_\_\_\_\_  
Petitioner Signature Print Name

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

IN THE CIRCUIT COURT OF THE STATE OF OREGON

FOR THE COUNTY OF COLUMBIA

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

Case No. \_\_\_\_\_

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

1. I, \_\_\_\_\_, 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 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 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 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: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**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.

**I hereby declare that the above statements are true and complete to the best of my knowledge and belief. I understand they are made for use in court and I am subject to penalty of perjury.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

---

Respondent Signature

Print Name

---

Address or Contact Address

City, State, Zip

Telephone or Contact Telephone

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

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Notary Public for \_\_\_\_\_/Court Clerk

My Commission Expires: \_\_\_\_\_

**I certify that this is a true copy:**

---

Petitioner  Respondent, Signature



**IT IS HEREBY ORDERED** that the following remedial sanctions shall be imposed upon  Petitioner  Respondent for their failure to comply with the terms of the above-described order or judgment:

1.  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 \$\_\_\_\_\_.
2.  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 in the amount of \$\_\_\_\_\_.
3.  An order designed to insure compliance with a prior order of the court as follows (*set forth order*):  
\_\_\_\_\_  
\_\_\_\_\_

4.  Payment of all or part of attorney fees incurred by a party as the result of a contempt of court in the amount of \$\_\_\_\_\_.
5.  Other: \_\_\_\_\_

The "money award" portion of the judgment shall be as follows:

**Money Award**

	<b>JUDGMENT CREDITOR</b> (This is the party receiving payment from Judgment Debtor) <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<b>JUDGMENT DEBTOR</b> (This is the party required to pay Judgment Creditor) <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
Full Name		
Address or Contact Address		
Attorney's Name, Telephone Number and Address		
<b>The following information is required ONLY for the party designated as the "Judgment Debtor" above.</b>		
Year of Birth		
Last Four Digits of Social Security Number		

Last Four Digits of Driver License Number and State of Issuance		
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**The following information is to be provided by the party designated as the “Judgment Creditor” above.**

Others Entitled to Portions of Judgment	The following person(s) or public bod(ies) are known by judgment creditor to be entitled to a portion of a payment made on the judgment (other than the judgment creditor’s attorney): <input type="checkbox"/> None or <input type="checkbox"/> _____ _____ _____
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Type of Judgment		Amount of Judgment
Payment of Money	<b>WHO PAYS</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	A lump sum payment of \$ _____ to be paid by (date): _____.
	<b>WHO RECEIVES</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Other: _____ _____ _____	<b>WHO PAYS</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____.
	<b>WHO RECEIVES</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

Prejudgment Interest	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Postjudgment Interest	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	Nine percent ( <u>9</u> %) per annum simple interest on the total judgment amount(s) of \$ _____. Interest begins accruing on the date the judgment is entered until fully paid.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Costs and Service Expenses (e.g., filing fees, hearing fees, trial fees, process fees)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____.
	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Attorney's Fees (if any)	WHO PAYS <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	\$ _____.



	WHO RECEIVES <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
--	--

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Circuit Court Judge

\_\_\_\_\_  
Print Name

**Both parties have agreed (stipulated) to the terms of this Supplemental Judgment for Contempt as evidenced by the signatures below (signatures must be notarized):**

\_\_\_\_\_  
**Petitioner Signature**

\_\_\_\_\_  
**Respondent Signature**

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ )

This instrument was acknowledged before me on \_\_\_\_\_, 20\_\_\_\_\_, (date)

by \_\_\_\_\_.  
*(Petitioner's Name)*

\_\_\_\_\_  
Notary Public for \_\_\_\_\_/Court Clerk  
My Commission Expires: \_\_\_\_\_

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ )

This instrument was acknowledged before me on \_\_\_\_\_, 20\_\_\_\_\_, (date)

by \_\_\_\_\_.  
*(Respondent's Name)*

\_\_\_\_\_  
Notary Public for \_\_\_\_\_/Court Clerk  
My Commission Expires: \_\_\_\_\_

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**Certificate of Readiness**

This proposed judgment is ready for judicial signature because (*check all that apply*):

- Service is not required under UTCR 5.100 because the other party has been found in **default** or an order of default is being requested with this proposed judgment; because this judgment is submitted **ex parte** as allowed by statute or rule; or this judgment is being submitted in **open court** with all parties present.
- Each party affected by this judgment has **stipulated** to or approved the judgment, as shown by the signatures on the judgment.
- I have **served** a copy of this judgment and written notice of the 7-day objection period set out in UTCR 5.100 on all parties entitled to service (*complete service information below*). **And:**
  - No objection has been served on me within that time frame.
  - I received objections that I could not resolve with the other party despite reasonable efforts to do so. I have filed with the court a copy of the objections I received and indicated which objections remain unresolved.
  - After conferring about objections, the other party agreed to file any remaining objection with the court.

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**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\_\_\_\_\_.

**Submitted by:**

---

<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent, Signature	Print Name
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Address or Contact Address	City, State, Zip	Telephone or Contact Telephone
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IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

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

Case No. \_\_\_\_\_

DECLARATION OF SERVICE

Personal Service (ORCP 7D(2)(a))

I, \_\_\_\_\_, declare I am a resident of the County of \_\_\_\_\_, State of \_\_\_\_\_. I am a competent person 18 years of age or older and not a party to or attorney in this proceeding. I certify that the person, firm, or corporation served is the identical one named in this action.

1. **Personal Service.** On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ a.m./p.m., I served a true copy of the Ex Parte Motion for Order to Show Cause Re: Contempt, Affidavit Supporting Ex Parte Motion for Order to Show Cause Re: Contempt, and the Order to Show Cause Re: Contempt by delivering them to Respondent \_\_\_\_\_  
(name)

in person at the following address \_\_\_\_\_ within the County of \_\_\_\_\_, State of \_\_\_\_\_.

**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.

**I hereby declare that the above statement is true to the best of my knowledge and belief, and that I understand it is made for use as evidence in court and is subject to penalty for perjury.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Server Print Name

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

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

In the Matter of  the Marriage of: )  
 )  
 ) Case No. \_\_\_\_\_  
\_\_\_\_\_, )  
Petitioner, )  
and ) RESPONDENT'S CERTIFICATE  
 ) OF MAILING  
 )  
\_\_\_\_\_, )  
Respondent. )

I certify that on \_\_\_\_\_, 20\_\_\_\_, I placed a true copy of the RESPONDENT'S  
AFFIDAVIT RESPONDING TO EX PARTE MOTION FOR ORDER TO SHOW CAUSE RE: CONTEMPT  
in the above case in the United States mail addressed to Petitioner at (*specify address*):

\_\_\_\_\_  
\_\_\_\_\_  
in a sealed envelope with postage paid.

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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\_\_\_\_.

\_\_\_\_\_  
Respondent Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address or Contact Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone or Contact Telephone