## CLACKAMAS CIRCUIT COURT Payment Plan Agreement (revised: 10 February 2025)

| Case#:                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                  | Balance                                                                                                                                                                                       |                                                                                                                                                                                                         |                                                                                   | Notes                                                                                           |                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                               |                                                                                                                                                                                                         |                                                                                   |                                                                                                 |                                                                                                                                                                                               |
| Full Name:                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                               |                                                                                                                                                                                                         |                                                                                   |                                                                                                 |                                                                                                                                                                                               |
| Mailing Add                                                                                                                                           | dress:                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                               |                                                                                                                                                                                                         |                                                                                   |                                                                                                 |                                                                                                                                                                                               |
| Cell Phone #                                                                                                                                          | #:                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                               |                                                                                                                                                                                                         |                                                                                   |                                                                                                 |                                                                                                                                                                                               |
| standard<br>is still du                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  | ay apply. If                                                                                                                                                                                  | I do not receive                                                                                                                                                                                        |                                                                                   |                                                                                                 | ent is due. I understand<br>inderstand that payment                                                                                                                                           |
| DOB: *Social Security #:                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                               | Drivers License #, ST:                                                                                                                                                                                  |                                                                                   |                                                                                                 |                                                                                                                                                                                               |
| Current Employer:                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                               |                                                                                                                                                                                                         | MO In                                                                             | O Income: \$                                                                                    |                                                                                                                                                                                               |
| • One o  1) The 2) I m not 3) My 4) I co 5) The pri • This as interce • This as interce *I do not had not limited t payment pla  Terms of I modified. | t pay according to this agray wages may be garnished ould be arrested e court may, without noticities collection agency. A greement reflects my ability agreement is subject to revive to give my Social Security notice, verification of my identity and just because I decide not to present the security of the property of the payment: \$ per more payment. | will happen is pay in full in mpt of court reement reement rece, refer my collection feety to pay. The ct from inconiew or changumber but do so and review of my provide my Socionth starting | f I do not pay as mmediately and ordered to a cases for collective will be added for ecourt may take me sources outsine at any time of voluntarily. I under of credit and employed ial Security number. | agreed: appear in on to the or each ca e legal act de of my rstand the ment histo | Oregon De ase referred regular incuse is for collery. The court when the court was ach month to | udge to explain why I did  partment of Revenue or a for collection. ing garnishment and ome.  ection purposes, including, but will not deny my request for a  hereafter until paid in full or |
|                                                                                                                                                       | Debtor's Signature                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                               | Date                                                                                                                                                                                                    |                                                                                   | Clerk of th                                                                                     |                                                                                                                                                                                               |
| Options:                                                                                                                                              | Send Check or Money orde<br>807 Main Street,<br>Room 104<br>Oregon City, OR 97045                                                                                                                                                                                                                                                                                | Effective: I                                                                                                                                                                                  | Oregon  May 19, 2025 thouse Road cy, OR 97045                                                                                                                                                           | 1163 Sta<br>Salem O                                                               | te Street<br>R 97301                                                                            | Pay Online at: www.courts.oregon.gov/ser vices/online/Pages/epay.as px A \$1.50 processing fee will be assessed per transaction                                                               |

Payment by Phone: credit/debit card (Visa, Mastercard, Discover or American Express) CALL:

• (888)-564-2828