

**IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF CLACKAMAS**

_____
_____
Petitioner,
v.
_____
_____
_____
Respondent/ <input type="checkbox"/> Co-petitioner.

**CASE NO.** \_\_\_\_\_

**MOTION TO ALLOW AMENDED  
PETITION**

Motion

Petitioner Co-petitioner \_\_\_\_\_, moves the Court for an Order to Allow Amended Petition in this case for the reasons described in the accompanying Declaration in Support of Motion to Allow Amended Petition. Petitioner desires to proceed with this case, and requests permission to amend the petition to reflect the changes as described.

=====

Statement of Points and Authorities

Pursuant to ORCP 23(A), leave shall freely be given, when justice so requires, to allow a party to amend a pleading if the pleading requires a response, or is amended more than 20 days after service. The amended pleadings must be served on parties who are not in default, or on all parties if the pleading asks for additional relief against the parties in default.

=====

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

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

**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 document.

**Submitted by:**

\_\_\_\_\_  
Printed Name

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

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

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



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**CASE NO.** \_\_\_\_\_

**DECLARATION IN SUPPORT OF  
MOTION TO ALLOW AMENDED  
MOTION**

I, Petitioner Respondent in the above-entitled matter, do hereby declare and say that the following information in support of my Motion to Allow Amended Motion is true to the best of my knowledge:

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

**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.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Printed Name

**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 document.

**Submitted by:**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
OSB # if Attorney

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

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

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



## NOTICE OF PROPOSED JUDGMENT OR ORDER

*To be sent to all other parties before submitting proposed Judgment or Order to the court for signature. Send the Judgment or Order to the other party with this Notice at least 7 days before submitting it to the court. This does not apply to judgments submitted with a Motion for Order of Default or after an Order of Default has been granted.*

This notice is to inform you that you can object to the attached proposed *Judgment or Order*.

Uniform Trial Court Rule (UTCRC) 5.100<sup>1</sup> allows you to object to the proposed judgment or order. If you have no objections, you can sign the last page and return it to me.

### **If you do object to any of the terms of the judgment or order, you may:**

**1) Contact me within 7 days of the date of this notice.** If you contact me and we are not able to resolve your objections after reasonable efforts, I will include your objections with the proposed judgment or order when I submit it to the court.

or

**2) Submit your objections directly to the court.** If you intend to submit your objections directly to the court, notify me within 7 days of the date of this notice so that I can inform the court of your intentions when I submit the proposed judgment or order. If you do object to the proposed order or judgment, you must contact me within 7 days of the date of this notice.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone

<sup>1</sup> <http://courts.oregon.gov/OJD/programs/utcr/pages/utcrules.aspx>



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CASE NO. \_\_\_\_\_

**ORDER ALLOWING AMENDED  
PETITION**

**It is hereby ORDERED:**

- Allowed.** Filing party is allowed to file an Amended Petition.
- Denied.**

*Judicial Signature*

\_\_\_\_\_

**Certificate of Readiness**

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

Service is not required under UTCR 5.100.  The other party has been found in **default** or an order of default is being requested with this proposed judgment;  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.

**Certificate of Service under UTCR 5.100**

I certify that on *(date)*: \_\_\_\_\_, I placed a true and complete copy of this proposed Order in the U.S. mail to *(name)* \_\_\_\_\_

at *(address)* \_\_\_\_\_

Submitted by: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
Signature	Print Name

**Submitted by:**

\_\_\_\_\_  
Printed Name OSB # if Attorney

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