## FOR THE COUNTY OF \_\_\_\_\_ In the Matter of: Case No. \_\_\_\_\_ Petitioner, and PETITION FOR GOVERNING CHILD SUPPORT JUDGMENT; and ORDER TO SHOW CAUSE Respondent. I, \_\_\_\_\_\_, being first duly sworn, say $\square$ I am the petitioner $\square$ I represent the State of Oregon in this proceeding and state as follows: **Petition** ☐ I petition ☐ State of Oregon petitions the court for an order requiring the parties to appear and show cause why the court should not issue a governing child support judgment with controlling terms and other provisions as requested below. ☐ I state ☐ State of Oregon states that there exist two or more child support judgments involving the 2. same obligor and the same time period, copies of which are attached hereto and incorporated herein by reference, as follows: Exhibit Agency Court Case County Entry/ Amount of Child Payment Start # Case # Effective Date Support Ordered Date 1 2 3 ☐ Additional sheets attached as "Attachment #2-Multiple Judgments." ☐ I petition ☐ State of Oregon petitions the court for a determination that the presumption (see Instructions) is rebutted for the following reasons: ☐ The last-issued child support judgment should be set aside under the provisions of ORCP 71 for the following reason(s): ☐ The mistake, inadvertence, surprise, or excusable neglect of Petitioner: (describe i.

IN THE CIRCUIT COURT OF THE STATE OF OREGON

| ii.  | ☐ There is newly discovered evidence which by due diligence could not have been discovered in time to move for a new trial under Rule 64F ( <i>Describe details</i> ):   |
|--|--|
| iii.   | ☐ The fraud, misrepresentation or other misconduct of Respondent ( <i>Describe details</i> ):  |
| iv.  | ☐ The judgment is void for the following reasons (Describe details):   |
| v.   | v The judgment has been satisfied, released or discharged, or a prior judgment upon which it is based has been reversed or otherwise vacated, or it is no longer equitable that the judgment should have prospective application ( <i>Describe details</i> ):  |
| administrator or hearing   |  |
| c. $\Box$ The  | last-issued child support judgment was issued after an earlier child support judgment and or set aside the earlier child support judgment.   |
| child support judgment judgment, v except that the last-issue terms of the preceding judgment judgment judgment judgment judgment judgment judgment the last-issue terms of the preceding judgment the last-issue terms of the preceding judgment in the last-issue terms of the last- | State of Oregon petitions the court for a determination that the terms of the last-issued are the controlling terms and supersede contrary terms of each earlier-issued child support (choose none, one or both): ed child support judgment is silent about monetary support, and thus the monetary support udgment issued next in time continue (See Exhibit #), and/or ed child support judgment is silent about health insurance, and thus the health insurance udgment issued next in time continue (See Exhibit #). |
| has asserted in Paragraph<br>therefore requests that to be as follows:   | ed out Paragraph 3, complete Paragraph 5.  |
|  | s contained in the earner-issued judgment dated shibit #), or  |
|  | s follows (describe monetary support and/or health insurance provisions you would agree  |
|  |  |

| 6. FILING CERTIFIED COPIES WITH C party to do so, ☐ I agree ☐ State of Oregon ag Governing Child Support Judgment with each cojudgment. It is understood that the failure to file Support Judgment) will subject the party to monand disbursements.                                | rees to a<br>ourt and<br>e a certification<br>etary sa | assume responsibility<br>for the agency that is<br>fied copy (if required<br>anctions, including but | for filing a certifie<br>ssued an earlier chil-<br>l to do so by the Go | d copy of this<br>d support order or<br>verning Child |
|--|--|--|---|---|
| This petition is based on Chapter 146 of more child support judgments or the administrat for a governing child support judgment when two obligor and child[ren] and the same period of tir WHEREFORE, petitioner requests a Go and other equitable relief that the Court thinks is | the 200 for of the 200 or mome.                        | e Child Support Prog<br>ore child support judg   | gram may file a petit<br>gments exist involvi                           | tion with the court ng the same                       |
| You are required to truthfully complete court. Check all boxes and complete all blanks and I selected this document for I paid or will pay money to document.  | this cer<br>that app<br>myself                         | ly:<br>and I completed it w  | document you are fithout paid assistance                                | ce.   |
| DATED:, 20   | _  | Signature  |   |   |
| STATE OF   | )  | ) ss.  |   |   |
| I,, being duly swo foregoing petition is true and correct to the best  | orn, say<br>of my l                                    | that I am the petition knowledge.  | ner in this matter and  | d that the  |
| Petitioner (signature)   | _  | Print Name   |   |   |
| Address or Contact Address   | City   | State  | Zip Code  |   |
| Telephone or Contact Telephone   |  |  |   |   |
| SIGNED AND SWORN to before me the  | nis  | day of   |   | , 20,   |
| by   | _·   |  |   |   |
|  |  | Public for   |   |   |

| $\square$ Allowed. (Option  | al) The parties ar       | e ordered to ap | pear on the       | day of              |
|---|--------------------------|-----------------|-------------------|---------------------|
| , 20  | at                       | a.m./p.m.       | in Room           | of the              |
| court should not issue a gover requested in the petition above   Denied. Other: | rning child suppor<br>e. | rt judgment wi  | h controlling ter | -                   |
| DATED this  | _ day of                 |                 | _, 20             |                     |
|   |                          |                 | Circuit Court     | Judge               |
| Submitted by:   |                          |                 | Print Name        |                     |
| ignature Print Name   |                          |                 |                   |                     |
| Address or Contact Address  | City, S                  | State, Zip      | Telephone or      | * Contact Telephone |
| I certify that this is a true co  | opy:                     |                 |                   |                     |
|   |                          |                 |                   |                     |
| Petitioner (signature)  |                          |                 |                   |                     |