

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

In the matter of <input type="checkbox"/> the Marriage/)	
Domestic Partnership of:)	
)	
_____ ,)	Case No. _____
Petitioner)	
)	ACKNOWLEDGMENT ABOUT
and)	DISSOLUTION/SEPARATION
)	
_____ ,)	
Respondent.)	

I, _____, am filing for dissolution/separation without full representation of an attorney.

I understand that I must pay all filing, service or hearing fees which are not deferred or waived by the court.

I understand that I should seek an attorney’s help if my case involves any of the following issues:

- Custody/parenting time of minor children who have not been living in Oregon for the last six months;
- Pensions, retirement benefits or profit-sharing plans;
- a pending personal injury case involving me or my spouse/partner;
- real estate that my spouse/partner or I own along with someone else, or real estate located outside of Oregon;
- a family business;
- a bankruptcy case filed by me or my spouse;
- complex tax issues; or
- domestic violence.

I understand that I am responsible for all information that I provide on these forms and any changes I make to the printed language.

I understand that if my spouse/partner contests the dissolution/separation (files court papers disagreeing with what I ask for), I should see an attorney immediately.

I understand that laws and legal procedures change and I should not use these forms unless they were recently approved by the court.

Signature	Print Name
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Address or Contact Address	City, State, Zip	Telephone or Contact Telephone
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