

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

In the Matter of ☐ the Marriage of:                     )

\_\_\_\_\_,                     )

Petitioner,                     )

and                     )

\_\_\_\_\_,                     )

Respondent.                     )

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

PETITIONER'S AFFIDAVIT SUPPORTING  
JUDGMENT OF DISSOLUTION

STATE OF OREGON                     )

County of \_\_\_\_\_                     ) ss.

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

I, \_\_\_\_\_, being first duly sworn, say: I am the petitioner in this proceeding. The parties were married/registered on (*date*): \_\_\_\_\_, in the County of \_\_\_\_\_, State of \_\_\_\_\_. Irreconcilable differences between the spouses/partners has caused the irremediable breakdown of the marriage/domestic partnership. ☐ Petitioner ☐ Respondent was an Oregon resident continuously for at least six months immediately prior to commencement of this suit. ☐ No domestic relations suits involving this marriage/partnership of Petitioner and Respondent are pending in any other court.

☐ There are no unemancipated children under the age of 18 to this marriage/partnership, OR no child of this marriage/partnership is age 18 to 21 and a "child attending school" as defined in ORS 107.108.

☐ Neither party is now pregnant.

☐ Respondent has not appeared in this matter and an Order of Default has been entered.

☐ Respondent filed a response and later ☐ signed and filed a Waiver of Further Appearance and Consent to Entry of Judgment, (or) ☐ has waived further hearing by stipulating to the terms of the Judgment.

This case is now ready for a hearing on the merits. I make this affidavit in support of a Judgment of Dissolution of Marriage/Domestic Partnership without a hearing. The allegations in my Petition are true and it is just and reasonable the relief requested in the proposed judgment be granted.

☐ The request for spousal support is supported by the following facts:

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

**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 form myself, and I completed it without paid assistance.
- ☐ I paid or will pay money to \_\_\_\_\_ for assistance in preparing this form.

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

\_\_\_\_\_  
Petitioner's 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: \_\_\_\_\_