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| STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY | MOTION REGARDING SUPPORT | (A) CASE NO. |
|--|---------------------------------|---------------------|

Court address Court telephone no.

(B) Plaintiff's name, address, and telephone no. moving party

Third party name, address, and telephone no. moving party

Defendant's name, address, and telephone no. moving party

v

(C) 1. a. On _____ a judgment
Date
or order was entered regarding support.
 b. There is currently no order regarding support.

(D) 2. The plaintiff defendant is ordered to pay support of \$ _____ each month.

(E) 3. The plaintiff defendant is ordered to pay child care of \$ _____ each month.

(F) 4. The plaintiff defendant is ordered to pay health care of \$ _____ each month.

(G) 5. Conditions regarding support have changed as follows:
Use a separate sheet to explain in detail what has happened and attach. Include all necessary facts.

(H) 6. _____ and I have agreed to support as follows:
Name
Use a separate sheet to explain in detail what you have agreed on and attach. Include all necessary facts.

(I) 7. I ask the court to order that support be paid as follows: See 6 above for details.
Use a separate sheet to explain in detail what you want the court to order and attach.

(J) _____
Date Moving party's signature

NOTICE OF HEARING

A hearing will be held on this motion before _____
Judge/Referee Bar no.

(K) on _____ at _____ at _____
Date Time Location

If you require special accommodations to use the court because of a disability, or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements. When contacting the court, provide your case number(s).

Note: If you are the person receiving this motion, you may file a response. Contact the friend of the court office and request form FOC 51.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this motion and notice of hearing on the parties or their attorneys by first-class mail addressed to the last-known addresses as defined in MCR 3.203.

(L) _____
Date Moving party's signature