

CIRCUIT JUDGE
DAVID A. HOORT
SUZANNE HOSETH KREEGER
MONTCALM COUNTY

THE CIRCUIT COURT
FOR



THE EIGHTH JUDICIAL

CIRCUIT OF MICHIGAN

OFFICE OF
BRUCE E. BASOM
FRIEND OF THE COURT/REFEREE
P.O. BOX 305
STANTON, MICHIGAN 48888
PHONE (989) 831-7332
FAX (989) 831-7376

The Montcalm County Friend of the Court Office (FOC) received a request from you for a review of your child support. By filing this motion and using the instructions, you are representing yourself in a court action (In Pro Per) and stating that you do not have legal representation. If you already have an attorney retained (for any reason) it is your responsibility to get his or her signature before filing this motion and notify him/her of the hearing.

INSTRUCTIONS FOR FILLING OUT MOTION;

- A. **Do not use pencil or colored ink** – other than black or dark blue. All five (5) sections must be completed correctly (including #2, a reason why you want this motion) or your motion will be returned to you or denied.
- B. A black line has been drawn on the form. You must complete all of the information above the black line only. A representative of the Friend of the Court will complete information below the black line.
- C. **Please make sure that you have the Plaintiff and Defendant filled out correctly or your motion will be returned to you.** Please note that the Plaintiff is the person who originally filed the case. If you are not sure who is the Plaintiff or Defendant, please contact our office to verify the same.

FILING A MOTION TO CHANGE CHILD SUPPORT:

1. Unless otherwise indigent, before motions can be scheduled, both motion fee and judgment fee **MUST** be paid in full. Judgment fees are only required in POST JUDGMENT cases and are not required in PRE JUDGMENT cases. The Motion fee is \$20.00 and the Judgment fee is \$40.00 and these **MUST** come as two (2) separate cashier's checks or money orders in all POST JUDGMENT cases and as one (1) cashier's check or money order in PRE JUDGMENT cases. **No cash or personal checks will be accepted.** The cashier's checks or money orders must be made payable to "County Clerk."
2. The original document and fees **MUST** be turned into the FOC office. The FOC will file the motion with the Clerk and send out notices of hearing to all parties.

At the time of the hearing you will need to provide several pay stubs (if working) and/or a statement concerning your source(s) of income. You will also need a copy of your most recent Federal Tax Return.

NOTE: You **MUST** appear to argue your motion. Should you fail to appear for the hearing, your motion will most likely be dismissed, and you may be assessed up to \$100.00 in court costs and will be unable to file another motion for six (6) months.

STATE OF MICHIGAN
8TH JUDICIAL CIRCUIT
MONTCALM COUNTY

MOTION
TO CHANGE SUPPORT ORDER

CASE NO.

Court Address

Judicial Court Complex,

Please print or type information...

629 N. State, PO Box 305, Stanton, MI 48888

Court Telephone No.

(989) 831-7332

Plaintiff's name, address, telephone no.

I, _____

Name of party filing motion

State:

____ Plaintiff

1. In this matter the _____ Defendant is currently
ordered to pay support in the amount of
\$ _____ each _____.

Defendant's name, address, telephone no.

week, month, etc.

2. Conditions regarding support have changed as
follows:

I REQUEST:

___ 3. The Support Order be changed to \$ _____ each week or an amount the court finds fair
and equitable.

___ 4. Other support provisions be changed as follows: That both parties be required to provide
medical insurance for the minor child/ren if reasonably available through employment or at
little or no extra cost.

5. ___ I have retained an attorney ___ I do not have an attorney

**I declare that the above statements are true to the best of my information, knowledge, and
belief. I also understand that if I fail to appear for the scheduled hearing, I may be assessed
\$100.00 court costs and will not be able to file another motion to change support for six
months.**

Date

Signature of party filing motion

Signature of Attorney

The party receiving, not requesting, this motion may ask the Friend of the Court for a form to answer this motion.

NOTICE OF HEARING

A hearing will be held on this motion before Bruce E. Basom, Circuit Court Referee on

Name of Judge or hearing officer

_____ at _____ at 629 N. State Street, Judicial Court
Date Time Complex, Stanton, MI 48888

Location

CERTIFICATE OF MAILING

I certify that on this date I mailed a copy of this motion and notice of hearing to the parties at the address stated above.

Date

Signature