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2nd copy - Plaintiff 3rd copy - Return Original - Court Approved SCAO 1st copy - Defendant

Approved, OOAO	13t copy - Deletidant		ord copy - rectain
STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	SUMMONS		CASE NO.
Court address			Court telephone no.
Plaintiff's name(s), address(es), and telephone n	o(s).	fendant's name(s), add	dress(es), and telephone no(s).
Plaintiff's attorney, bar no., address, and telephor	ne no.		
Instructions: Check the items below that apply to if necessary, a case inventory addendum (form Market and Instructions).			
 □ There is one or more pending or resthe family or family members of the confidential case inventory (form MC □ It is unknown if there are pending or the family or family members of the Civil Case □ This is a business case in which all □ MDHHS and a contracted health pla 	person(s) who are the subject of C 21) listing those cases. resolved cases within the jurisdiperson(s) who are the subject of or part of the action includes a bun may have a right to recover ex	the complaint. I had ction of the family the complaint. Usiness or comment penses in this case.	division of the circuit court involving rcial dispute under MCL 600.8035. e. I certify that notice and a copy of
the complaint will be provided to MD There is no other pending or resolve complaint. A civil action between these parties	ed civil action arising out of the sa	ame transaction or	_
been previously filed in uthis cou	rt, 🗆		Court, where
it was given case number	and assigned t	o Judge	
The action ☐ remains ☐ is no lor	nger pending.		
Summons section completed by court clerk.	SUMMONS		
NOTICE TO THE DEFENDANT: In the 1. You are being sued. 2. YOU HAVE 21 DAYS after receiving serve a copy on the other party or ta served outside this state). 3. If you do not answer or take other addemanded in the complaint.	this summons and a copy of the ake other lawful action with the	complaint to file a court (28 days if y	written answer with the court and you were served by mail or you were

to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

4. If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter

Issue date Expiration date* Court clerk

^{*}This summons is invalid unless served on or before its expiration date. This document must be sealed by the seal of the court.

SUMMONS

Case No.

PROOF OF SERVICE

TO PROCESS SERVER: You are to serve the summons and complaint not later than 91 days from the date of filing or the date of expiration on the order for second summons. You must make and file your return with the court clerk. If you are unable to complete service you must return this original and all copies to the court clerk.

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSE	ERVICE
--	--------

	OFFICER CI	ERTIFICATE	E	OR [AFFIDAVIT OF PRO	OCESS SERVER	
I certify that I am	a sheriff, dep	uty sheriff, b	ailiff, appointed	Being first	duly sworn, I state that	at I am a legally competent	
court officer, or at		• •	2.104[A][2]),		I am not a party or an		
and that: (notarization not required)		1)		party (MCI	party (MCR 2.103[A]), and that: (notarization)		
			ons and complain		ppy of the summons a	nd complaint,	
together with							
List a	all documents se	rved with the s	ummons and complair	nt			
						on the defendant(s):	
Defendant's name			Complete address(es)	of service		Day, date, time	
				iplaint, together wi	ith any attachments, or	the following defendant(s)	
and have been Defendant's name	unable to co		ice. Complete address(es)	of convice		Day, date, time	
Delendant's name			Complete address(es)	or service		Day, date, time	
I declare under th best of my inform				rice has been exa	mined by me and that	its contents are true to the	
Service fee	Miles traveled	Fee		Signature			
\$		\$		Signature			
Incorrect address fee	Miles traveled	Fee	TOTAL FEE	Name (type or pr	int)		
\$	1	\$	\$				
			I	Title			
Subscribed and s	worn to befor	e me on				County, Michigan.	
My commission e	xpires:		Signat	ure:	rk/Notary public		
Notary public, Sta	ite or wichiga	in, County o	I				
			ACKNOWLEDG	MENT OF SERV	ICE		
I acknowledge that	at I have rece	ived service			gether with		
					Attachments		
			on	Alian -			
			Day, date				
Signature			on l	oehalf of		·	

STATE OF MICHIGAN CIRCUIT COURT - FAMILY DIVISION COUNTY

CONFIDENTIAL CASE INVENTORY (DOMESTIC RELATIONS AND JUVENILE CODE)

CASE NO.	
PETITION NO.	
JUDGE	

	JUDGE
Plaintiff's name	V Defendant's name
In the matter of	

Instructions: List any known pending or resolved family division cases involving the person(s) named in the complaint or petition or family members of the person(s) named in the complaint or petition. File the completed form with the complaint or petition, but do not attach or staple together. Complete and file additional sheets if necessary.

Examples of family division cases include personal protection orders, divorce, custody, paternity, child support, juvenile delinquency, and child protective proceedings. See MCL 600.1021 for a complete list.

Note: This form is confidential and not to be served on other parties in this case.

Court information (name, number, and county/state)				
☐ This court ☐ Other court or tribunal:				
Case name			Case/File no.	
Assigned judge	Case status Pending	Resolved	Are support or cu	ustody/parenting time orders in effect? Custody/Parenting Time
Court information (name, number, and county/state)				
☐ This court ☐ Other court or tribunal:				
Case name			Case/File no.	
Assigned judge	Case status		Are support or cu	ustody/parenting time orders in effect?
	☐ Pending	Resolved	Support	☐ Custody/Parenting Time
Court information (name, number, and county/state)				
☐ This court ☐ Other court or tribunal:				
Case name			Case/File no.	
Assigned judge	Case status			ustody/parenting time orders in effect?
	☐ Pending	Resolved	Support	☐ Custody/Parenting Time
Court information (name, number, and county/state)				
☐ This court ☐ Other court or tribunal:				
Case name			Case/File no.	
Assigned judge	Case status		Are support or cu	ustody/parenting time orders in effect?
0 7 0	☐ Pending	Resolved	Support	Custody/Parenting Time
Date		Signature		

Approved, SCAO	Or 1s	iginal - Court t copy - Defe	ndant	2nd co 3rd co	ppy - Plaintiff py - Return	
STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	Page	COMPLAII of	NT pages		CASE NO.	
Court address				l	Court telephone	no
Plaintiff's name(s), address(es), and telephone n	o(s).		Defendant's nam	e(s), address(es), and	telephone no(s).	
		v				
Plaintiff's attorney, bar no., address, and telepho	ne no.	-				
		,				

Date Signature

APPLICATION FOR IV-D CHILD SUPPORT SERVICES

(For Privately Filed Domestic Relations Cases Only)

FOR OFFICE USE ONLY App Request App Returned **IV-D** Case Number Date Date

State of Michigan

Friend of the Court Instructions: This is an application for IV-D child support services, and is intended only for parents filing a domestic relations case (divorce, annulment, separate maintenance, paternity, or custody) on their own or through their own attorney. This form is not intended for people without children or those who are not a party to a domestic relations case. This application is designed to be used with a Verified Statement, Judgment Information Form, or other similar court form. AUTHORITY: 45 Code of Federal Regulations 302.33. Completion of this application for IV-D child support services is voluntary. Who does the child(ren) live with most of the time? (This information is used Domestic Relations Filing/Docket Number (if available) for administrative purposes only and has no impact on any pending custody hearings.) What is your relationship to the child(ren) for whom you are applying for child support services? ■ Mother □ Father ☐ Both ■ Mother ☐ Father A. Mother's Information Mother's Name (First, Middle, Last) Mother's Social Security Number Mother's Mailing Address (Street, City, State, Zip Code) Mother's Telephone Number B. Father's Information Father's Name (First, Middle, Last, Suffix) Father's Social Security Number Father's Mailing Address (Street, City, State, Zip Code) Father's Telephone Number C. Family Violence Disclosure I believe that disclosure of my address or other identifying information may result in physical or emotional harm to me or the child(ren). If yes, additional information will be requested by Friend of the Court staff. Yes □ No D. Acknowledgement for Child Support Recipient If I am sent money in error or overpaid, the Michigan IV-D child support program will take action to correct this error. By checking the "yes" box below, I give the IV-D program permission to pay back the error or overpayment by keeping 25% (or otherwise as directed below) from my future child support payments. If I later change my mind, I must contact the Friend of the Court office. Failure to check "yes" has no effect on my eligibility for IV-D child support services. Yes (Check one if different than 25%) No, please contact me before you try to recover an amount from my support payments. E. Acknowledgement for Applicant I understand that I must provide my Social Security number pursuant to the Social Security Act, 42 USC 66(a)(13), in order for Michigan's child support program to provide services. I have received or have had an opportunity to review a copy of DHS-Pub-748, Understanding Child Support: A Handbook for Parents, at www.michigan.gov/childsupport in the Popular Forms section. I understand that I can also ask for a printed copy from the Friend of the Court. I request child support services available under Title IV-D of the Social Security Act for the child(ren) listed in my domestic relations court filing (refer to DHS-Pub-748 for a list of available services). Applicant or Attorney of Record Signature (Signature is required) Applicant or Attorney of Record Printed Name Date If signed by an attorney, (s)he is acting on behalf of Printed Name (Required)

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs or disability.

STATE OF MICHIGAN CIRCUIT COURT	DOMESTIC VIOLENCE SCREENING	CASE NO. and JUDGE
Your name: First, middle, and last name		Date:
Our goal is to provide a safe environm However, there are times bringing bot will help us determine whether both pa only be viewed by judges, referees, an	nent for families with a friend of the court case th parents together may not be appropriate. You arents can meet together in a safe environment of the court staff. It cannot be viewed court proceedings. Please answer the following.	our answers to the following questions nt. The information you provide can by the other parent or his or her
1. Do you feel safe around the other p	parent? \square yes \square no If no, please ϵ	explain:
2. Is there currently or has there ever between you and the other parent?	been a personal protection order or a no cont ☐ yes ☐ no If yes, please explain	act order limiting contact
3. Is there currently or has there ever parent or you by someone else? include when and where:	been a personal protection order or a no cont ☐ yes ☐ no ☐ Unknown about othe	
_	home or involved in any incidents in the past y	
□ yes □ 110 11 yes, piease 0	describe.	

	nestic Violence Screening (2/20) le 2 of 3 Case No
	Have you or the other parent been arrested in the past year? \Box yes \Box no
	If yes, please describe:
6.	Have you ever felt unsafe around the other parent? \square yes \square no
	If yes, please explain:
7.	Is there currently or has there ever been child protective (abuse/neglect) actions involving you and/or the other parent in
	Michigan or any other state or country? \square yes \square no \square unknown about other parent
	If yes, please explain:
8.	Do you have any concerns about discussing issues regarding your children in front of the other parent? \Box yes \Box no
	If yes, please explain:
_	
9.	Are you afraid that the other parent will harm or pressure you during or after a friend of the court meeting because of
	what is discussed in the meeting? \square yes \square no \square If yes, please explain \square

Domestic Violence Screening (2/20)	Case No
Page 3 of 3	
10. Do you have any concerns about sitting in the same room wi	
If yes, please explain:	
11. Do you think you can speak up for yourself in a friend of the o	court meeting if the other parent is also present?
☐ yes ☐ no If no, please explain:	
12. Has the other parent ever made you feel threatened or haras	ssed?
If yes, please explain:	
13: Is there anything not already discussed that would prevent ye	ou from participating in a friend of the court meeting with
the other parent? \square yes \square no If yes, please explain	ain:
and earlier parente.	4111.
Your safety is important, so please contact us to discuss any safe address your concerns.	ety concerns you may have and what can be done to
Date Signa	ature

RECORD OF DIVORCE OR ANNULMENT

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
By authority of MCL 333.2813.

Court Case Number						

County

State File Number

1.	Plaintiff's Full Name	(First, Middle, L	ast)		_ 2. Plaintiff's Birthdate	(Month, Day, Year)
3.	Last Name Before First Ma	arried (if different)				
4.	Plaintiff's Residence		(City, Village, or Township)		(County)	(State)
5.	Plaintiff's Birthplace		(State or Foreign Country)		_ 6. Number of this Ma	rriage(First, Second, etc Specify)
7.	Defendant's Full Name	(First, Middle, I	_ast)		_ 8. Defendant's Birtho	date(Month, Day, Year)
9.	Last Name Before First Ma	arried (if different)				
10.	Defendant's Residence		(City, Village, or Township)		(County)	(State)
11.	Defendant's Birthplace		(State or Foreign Country)		12. Number of this Mari	(First, Second, etc Specify)
13.	Place of this Marriage	(City, Village, or Township)		(County)		(State or Foreign Country)
	Date of this Marriage		45 D.1. O		☐ Check if Not Separated	(Month, Day, Year)
16.	Number of Minor Children	in Household at Separa	ation Date (Filing D	ate if Not Separated	Check If None	(Number)
17.	Plaintiff's Attorney		(Name - Type or Print)		(Bar Numl	per)
18.	Attorney's Address	(Number and Street)		(City)	(State)	(Zip Code)
19.	Judgment of(Divorce/Annulm	Physica	er of Minor Childre al Custody was Awa	arded to: Plaintiff	DefendantJoin mber)	other(Number) (Number)
21.	Judgment Recorded on		22. I certify the			
	Certifying Official			(Title)		signed)

Failure to provide the required information is a misdemeanor punishable by imprisonment of not more than 1 year or a fine of not more than \$1,000.00 or both.

STATE OF MICHIGAN JUDICIAL CIRCUIT PROBATE COURT COUNTY

UNIFORM CHILD CUSTODY JURISDICTION ENFORCEMENT ACT AFFIDAVIT

CASE NO. and JUDGE

COUNT	ENFORCEMENT ACT AFFIDAVIT	
Court address		Court telephone no
CASE NAME:		
1. The name and present address o	of each child (under 18) in this case is:	
2. The addresses where the child(re	en) has/have lived within the last 5 years are:	
3. The name(s) and present addres	es(es) of custodians with whom the child(ren) has	s/have lived within the last 5 years are:
order, or proceeding (including d paternity, termination of parental	articipated (as a party, witness, or in any other caivorce, separate maintenance, separation, negle rights, and protection from domestic violence) coany other state, except : Specify case name and number	ct, abuse, dependency, guardianship, ncerning the custody or parenting time
for enforcement or a proceeding	oceeding that could affect the current child custoon relating to domestic violence, a protective order, er state, except : Specify case name and number, court n	termination of parental rights, or
	uing. has been stayed by the court. It is necessary to protect the child(ren) because to ment or abuse or is/are otherwise neglected or d	
· · · · · · · · · · · · · · · · · · ·	is not already a party to this proceeding who ha of, or parenting time with, the child(ren), except	
7. The child(ren)'s "home state" is $_{-}$		$_{\scriptscriptstyle -}$. See next page for definition of "home state."

Page 2 of 2	Enforcement Act Affidavit (3/21))	Case No
☐ 8. I state that a party's or chinformation.	nild's health, safety, or liberty	would be put a	t risk by the disclosure of this identifying
I have filled this form out comp or any other state that could a	•		o advise this court of any proceeding in this state
Signature of affiant	Name of affiant (type or	print)	Address of affiant
Subscribed and sworn to before	re me on		
		Deputy clerk/No	ary public signature
My commission expires on	·	Name (type or p	rint)
			cting in the County of or a remote electronic notarization platform.
consecutive months immediate	ely before the commencement ans the state in which the ch	nt of a child-cus ild lived from bi	at or a person acting as a parent for at least 6 stody proceeding. In the case of a child less than rth with a parent or person acting as a parent. A cluded as part of the period.

Original - Court file 1st copy - Assignment clerk/Extra 2nd copy - Friend of the court/Extra Approved, SCAO

3rd copy - Opposing party 4th copy - Moving party

STATE OF MICHIGAN

CASE NO.

JUDICIAL CIRCUIT JUDICIAL DISTRICT COUNTY	NOTICE OF	HEARING A	AND MOTIO	ON	
Court address				l	Court telephone n
Plaintiff name(s)			Defendantna	ame(s)	
Plaintiff's attorney, bar no., address, and telepho	one no.	v	Defendant's	attorney, bar no., ad	dress, and telephone no.
	NOT	ICE OF HEA	ARING		
1. Motion title:					
2. Moving party:					
3. This matter has been placed on the	e motion calendar	for:			
Judge			Bar no.	Date	Time
Hearing location Court address above					
If you require special accommodati arrangements.	ons to use the cou	rt because o	disabilities	, please contact	the court immediately to make
		MOTION			
Date		/s/ Signa	ature		
	CEF	RTIFICATE	F MAILING	3	
certify that on this date I served a copy of to their last-known addresses as define			on the parti	es or their attorne	eys by first-class mail addresse
Date		/s/ Signa	turo		
ale		อเตกล	ture		

CA	SF	NO	and	II.	IDGI

JUDICIAL CIRCUIT COUNTY	NOTICE OF HEARING	
Court address		Court telephone no
Plaintiff's name, address, and teleph	one no.	
Attorney:		
V Defendant's name, address, and tele	ephone no.	
Attorney:		
A hearing will be held		
Date:		
Time:		
Location:		
Judge/Referee:		Referee
for the following purpose:		
☐ The defendant is required to attend ☐ The plaintiff is required to attend th	· · · · · · · · · · · · · · · · · · ·	
	e the court because of a disability, or if you proceedings, please contact the court immede number(s).	
	CERTIFICATE OF MAILING	
as defined by MCR 3.203. I declare u	parties or their attorneys by first-class mail ac nder the penalties of perjury that this certifica est of my information, knowledge, and belief.	
Date	Signature	
Approved, SCAO	Distribute form to:	
Form FOC 7, Rev. 3/21	Court Plaintiff	

Page 1 of 1

Plaintiff Defendant Friend of the court

SE	NO	and	IIIDGI	=
-	NUL	ann		_

JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	FEE WAIVER	REQUEST	
Court address			Court telephone no.
Plaintiff/Petitioner's name, address, and telephone	no.		s name, address, and telephone no.
Plaintiff/Petitioner's attorney, bar no., address, and	telephone no.	Defendant/Respondent's	s attorney, bar no., address, and telephone no.
In the matter of			
Instructions: Complete this form and file request and the decision on the other parts.		r you receive a decisio	n on your request, you must serve you
I request a waiver of my filing fees for the 1. I receive the following type(s) of pul Food Assistance Program throug Medicaid (including Healthy Mich Family Independence Program th Women, Infants, and Children be Supplemental Security Income th Other means-tested public assist My public assistance case number(2. I am represented by a legal service of indigence. The name of the legal	blic assistance because the State of Michigan, CHIP, and ESociation of the State of Menefits (WIC) arough the federal gostance: [Incomplete the state of Menefits (WIC) arough the federal gostance: [Incomplete the state of Menefits (WIC) arough the federal gostance: [Incomplete the state of Menefits (WIC) arough the federal gostance: [Incomplete the state of Menefits (WIC) arough the federal gostance arough the fede	use of indigence: gan (also known as FA O) Michigan (also known overnment (SSI) ne" if no case number. Do now e assistance from a la	as FIP or TANF) ot write your SSN.
☐ 3. I am unable to pay the fees and I di My gross household income is \$ The number of people in my housel	d not check item 1 o	r 2 above. everv	
The number of people in my housel My source of income is List assets and their worth, such as bank acc			
List obligations and how much you pay, such			
I declare under the penalties of perjury th of my information, knowledge, and belief		een examined by me a	and that its contents are true to the best
Date		Signature	
Approved, SCAO		Distribute form to:	

Form MC 20, Rev. 10/19 MCR 2.002 Page 1 of 2

Court
Applicant
Other parties
Friend of the court (when applicable)

Fee Waiver Request (10/19)	Case No
Page 2 of 2	
Payment of filing fees is waived.	CLERK WAIVER
	Signature of court clerk and date
IT IS ORDERED: 1. Payment of filing fees is waived because: a. Your gross household income is under on the fees would constitute a financial harm c. Other:	125% of the federal poverty guidelines, but payment of
If you become able to pay the fees before this	s case is resolved, you must notify the court.
 □ 2. The fee waiver request is denied because: □ a. Your gross household income is above the fees would not constitute a financial □ b. Other: 	125% of the federal poverty guidelines and payment of hardship for you.
	Judge/Magistrate (when authorized) signature and date
	NOTICE
	our case and preserve your filing date, you have 14 days from the issue . To request a review, fill out a Request for Review of Denied Fee Waiver
	Issue date (completed by clerk)

Original - Court 1st copy - Applicant Copies - All other parties

Approved, SCAO

STATE OF MICHIGAN
JUDICIAL DISTRICT
JUDICIAL CIRCUIT

DEFAULT REQUEST AND ENTRY

CASE NO.

JUDICIAL CIRCUIT	REQUEST AND	ENTRY	
Court address			Court telephone no.
Plaintiff name(s), address(es), and telephone no	o(s).	Defendant name(s), ad	dress(es), and telephone no(s).
	v		
Plaintiff's attorney, bar no., address, and teleph	one no	Defendant's attorney h	par no., address, and telephone no.
Traintin's attorney, bar no., address, and teleph	THE HO.	Defendant's attorney, L	ai no., address, and telephone no.
Party in default:			
	REQUES'	Т	
I request the clerk to enter the defa	ult of the party named above	for failure to plead o	r otherwise defend as provided by law.
2. The defaulted party is not an infant	or incompetent person.		
	ary but there has been notice of provided. Attached, as approp	of pendency of the ac priate, is a waiver of	tion and adequate time and opportunity rights and protections provided under
This request is made on my persor request.	al knowledge and, if sworn a	s a witness, I can tes	stify competently to the facts in this
I declare under the penalties of perjur my information, knowledge, and belie	•	examined by me and	that its contents are true to the best of
Date	Ap	plicant/Attorney signature	Bar no.
NOTE: Default can be entered by a district cou clerk without the request of a party.	DEFAULT EN	ITRY	
The default of the party named above	for failure to plead or otherwi	ise defend is entered	
Date	Cou	ırt clerk	
	CERTIFICATE OF	MAILING	
I certify that on this date I served copie to their last-known addresses as defined		oriate parties or their	attorneys by first-class mail addressed
Date	Sigr	nature	

CASE	NO.	and	JU	IDGI	l
------	-----	-----	----	------	---

JUDICIAL CIRCUIT COUNTY	JUDGMENT OF WITH CHIL			
Court address				Court telephone no.
Plaintiff's name, address, and telephone no.	v	Defendant's name, ad	ddress, and telephone no.	
1. This judgment is entered after	er trial.		nt of the parties.	
2. The plaintiff filed a complaint for div	orce against the defenda	nt.		
3. THE COURT FINDS that there has matrimony have been destroyed an				
IT IS ORDERED:				
4. The marriage between the plaintiff,			, a	nd the defendant,
		, is dis	ssolved and the parties	are now divorced.
5. Custody of the minor child(ren),				
				, is as follows:
\square a. Legal custody is awarded to	☐ plaintiff. ☐ defer	ndant. 🗌 both	parties, jointly.	
\square b. Physical custody is awarded t	o \square plaintiff. \square defer	ıdant. 🗌 both	parties, jointly.	
☐ c. This court is not going to make child(ren)'s home state. (Para			or child(ren) because Mi	chigan is not the
☐ 6. A parent with physical custody m changes.	ust notify the friend of the	court in writing w	henever the address of	a minor child
\square 7. The domicile of the minor child(re	en) may not be moved fro	m the State of Mi	chigan without prior app	roval of the court.
8. Pursuant to MCL 722.31 neither of this case, and the child(ren) has			y from where they lived	at the beginning
☐ MCL 722.31 does not apply becabegan.	ause the parties lived mor	e than 100 miles	away from each other w	hen this case
☐ MCL 722.31 does not apply beca	ause one of the parties is	granted sole lega	I custody of the parties'	minor child(ren).
☐ The parties agree that either partiled, as long as they still live in the		00 miles from wh	ere the parties lived whe	en this case was

Distribute form to:

Page 2	2 of 4		
	xcept as provided in item 10, neither parent shall exercise p the Hague Convention on the Civil Aspects of International		ion that is not a party
□ 10.). Based on written agreement of the parties, Name	may	exercise parenting
	Name of foreign country/nation	nich is not a party to the Hague Conv	ention on the Civil
	Aspects of International Child Abduction.		
□ 11.	. The parents shall cooperate with respect to a child so as, emotional, and physical well-being and to give and afford security. Neither parent will, directly or indirectly, influence parent. Each parent will endeavor to guide a child so as to and the other parent. The parties will cooperate with each child's best interests. Whenever it seems necessary to acotherwise take action regarding a child, each of the parties shall do anything which may estrange the other from the will hamper the free and natural development of the child	a child the affection of both parents as a child so as to prejudice a child ago promote the affectionate relationsh to other in carrying out the provisions djust, vary, or increase the time allotted as shall act in the best interests of the child, injure the child's opinion of the	and a sense of ainst the other ip between a child of this order for a ed to either party, or e child. Neither party
□ 12.	2. Parenting time is established as follows:		
	Child support: ☐ a. Child support, child care, health care and other medica Uniform Child Support Order, entered contemporaneous reference. ☐ b. A Uniform Support Order is not required because:	usly with this judgment of divorce and	d incorporated by
	 □ b. A Uniform Support Order is not required because: □ i. support cannot presently be ordered in this action. 	This court recognizes that in Case no	ımber ,
	theName of court	in	has issued the
			to nav
	controlling support order that already requires Nam	ie of payor	to pay
	support for the child(ren) in this case and currently	/ retains exclusive jurisdiction.	
	\square ii. the court lacks sufficient personal jurisdiction ove	r the nonresident defendant to enter	a support order.
	Spousal support: ☐ Neither party is awarded spousal support and spousal su ☐ Spousal support is reserved. ☐ Spousal support is awarded according to the attached Un		
15. P (Personal property: ☐ Each party is awarded the personal property now in his/herelated to that property. The other party has no claim to the ☐ The parties' personal property is divided according to the	nat property.	

Case No. ___

Judgment of Divorce With Children (7/21)

Judg ı Page	ment of Divorce With Children 3 of 4	(7/21)		Case No.
16.	Debt: ☐ There are no debts to be ☐ Each party is responsib ☐ Debts are divided accor	le for paying the de	ebts in his/her name. ed Personal Property and Debt Adder	ndum.
17.	related to the vehicle(s)	e vehicle(s) now in l . The other party h	his/her name and possession, and is as no claim to any vehicle in the othe livided according to the attached Veh	er's name and possession.
18.	Real Property: ☐ The parties do not own ☐ The parties own real pro		ded according to the attached Real F	Property Addendum.
	whether vested or unverties. Each party is awarded he plans or accounts, whet property. Pensions, annuities, independents.	sted, accumulated nis/her own pension ther vested or unve lividual retirement a	al retirement accounts or other types or contingent, to be divided. ns, annuities, individual retirement acested, accumulated or contingent, as accounts or other types of retirement agent, are divided according to the at	ccounts or other types of retirement his/her own sole and separate
		ne life of the other p	ved in this judgment, any interests of party, as beneficiary or otherwise, are other.	
	according to the attached l given tax year is not the pa	Income Tax Addeno arent with whom the	deductions, credits, and exemptions follows: dum. If the parent claiming the deduction e child(ren) lived for the greater numuse his/her claim to the dependent tax	ctions, credits, and exemptions in a ber of nights during the year, the
	party's present medical or l Consolidated Omnibus Bu	health insurance po dget Reconciliation his/her respective	BRA: Either party may obtain coverage olicy carried through his/her employn a Act of 1985 (COBRA). Each party of plan administrator of this provision, to COBRA.	nent pursuant to the provisions of the shall, immediately upon entry of this
	to the other party all the do	ocuments required	this judgment is entered, each party to divide the property and debt as or ect such a transfer, if necessary.	
		ned on the motion o	y of his/her assets from the other pa of either party. If this motion were to I isclosed assets.	
□ 2	5. Costs and Fees: Any p ☐ paid by the plaintiff.	previously suspend \Box paid by the d	ded costs and fees of this case shall lefendant. \Box waived permanently	
□2	6. The □ plaintiff's	defendant's	name shall be changed to	

Judgment of Divorce With Children (7/21) Page 4 of 4			Case No.	
27. Attachments: The following addendums are atta Personal Property and Debt Addendum Pension/Retirement Account Addendum	☐ Ve	and incorporated into this hicle Addendum come Tax Addendum	judgment of divorce. ☐ Real Property Addendum ☐ Parenting Time Addendum	
☐ 28. Other provisions:				
29. Settlement of Claims Between the Parties: Th	iis judg	ment resolves the last per	nding claim and closes this case	€.
30. When Judgment Becomes Final: This judgmen			-	
31. Jurisdiction Retained: This court retains jurisdic	ction of	this matter to enforce all t	he terms of this judgment of dive	orce.
		Judge signature and date		
Approved:				
Plaintiff signature	Date	Defendant signature		Date

JUDGMENT OF DIVORCE,

CASE	NO.	and	JUD	GI
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JUDICIAL CIRCUIT COUNTY	PERSONAL	CHILDREN PROPERTY AND ADDENDUM		
Court address			Court tele	ephone no.
Plaintiff name		V Defendant name		
The plaintiff is awarded the following po	ersonal property, fre	e and clear of any claim	of the defendant:	
The defendant is awarded the following	g nersonal property	free and clear of any clai	m of the plaintiff	
The deterior is awarded the fellowing	g personal property,	nee and olear or any olar	m or the plantin.	
The plaintiff is responsible for the follow	wing debts, and sha	ll not hold the defendant i	esponsible for these debts:	
The defendant is responsible for the fo	ollowing debts, and s	hall not hold the plaintiff i	responsible for these debts:	

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY

JUDGMENT OF DIVORCE, WITH CHILDREN VEHICLE ADDENDUM

CASE	NO.	and	JUD	GI
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333KT	VEHICLE ADDENDUM	
Court address		Court telephone no.
Plaintiff name	v Defendant name	
The Daintiff Defendant	is awarded the following vehicle, free and cl	ear of any right, title, or interest of
the other party. Year Make	Model	Vehicle Identification number (VIN)
☐ The ☐ plaintiff ☐ defendant shall not hold the other party resp	is responsible for all loan payments for the ve onsible for any debt associated with the vehicle	
or		
\Box There is no loan or debt to repay v	vith regard to the vehicle.	
The □ plaintiff □ defendant	is awarded the following vehicle, free and c	ear of any right, title, or interest of
the other party	Model	Vehicle Identification number (VIN)
☐ The ☐ plaintiff ☐ defendant shall not hold the other party resp	is responsible for all loan payments for the ve onsible for any debt associated with the vehicle	·
or		
\Box There is no loan or debt to repay v	vith regard to the vehicle.	
The ☐ plaintiff ☐ defendant	is awarded the following vehicle, free and c	ear of any right, title, or interest of
the other party. Year Make	Model	Vehicle Identification number (VIN)
☐ The ☐ plaintiff ☐ defendant shall not hold the other party resp	is responsible for all loan payments for the ve onsible for any debt associated with the vehicle	
or		
\Box There is no loan or debt to repay v	vith regard to the vehicle.	

Judgme Page 2 c	,	th Children Vehicle Add	endum (7/21)	Case No	
The	\square plaintiff	defendant is	s awarded the following vehicle, from	ee and clear of any right, title, o	r interest of
the otl	ner party. <u> </u>	Make	Model	Vehicle Identification number	· (VIN)
	e □ plaintiff Il not hold the		responsible for all loan payments to ble for any debt associated with the	•	defendant
or					
☐The	ere is no loan o	or debt to repay with	regard to the vehicle.		

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY

JUDGMENT OF DIVORCE, WITH CHILDREN REAL PROPERTY ADDENDUM

CASE	NO.	and	JUD	GI
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Court address				Court telephone no.
Plaintiff name		v	Defendant name	
The parties own real property located	atAddress			
The legal description is:				
The parcel identification number is				
This property is \Box awarded to the p and will be sold within a reasonable ti				arded to both plaintiff and defendant,
The \Box plaintiff \Box defendant \Box by other costs and debts associated with		respo	onsible for the mortg	age, insurance, taxes, liens, and any
☐ The parties will share equally in the placed on the open market for sale in common until the sale. Both par documents required at the time of	at a price agreed up ties will cooperate w	on b	y the parties. The pa	rties will hold the property as tenants
☐ The ☐ plaintiff ☐ defendant	shall refinance the h	nome	and remove the $\ \Box$	plaintiff's \square defendant's name.
	shall sign a quitclair □ defendant.	n dee	ed to the property with	nin 30 days of entry of the judgment for
The parties own real property located The legal description is:	at Address			
The parcel identification number is			·	
This property is \Box awarded to the p and will be sold within a reasonable ti				arded to both plaintiff and defendant,
The \Box plaintiff \Box defendant \Box by other costs and debts associated with		respo	onsible for the mortg	age, insurance, taxes, liens, and any

Judgment of Divorce, With Page 2 of 2	h Children Real Pr	operty Addendum	(7/21)	Case No.			
The parties will share equally in the profit or loss from the sale, and in any related expenses. The property will be placed on the open market for sale at a price agreed upon by the parties. The parties will hold the property as tenants in common until the sale. Both parties will cooperate with regard to the sale and the execution of all necessary documents required at the time of the sale.							
☐ The ☐ plaintiff	☐ defendant	shall refinance	the home and remove the	e □ plaintiff's □ defendant's	name.		
☐ The ☐ plaintiff the benefit of the	☐ defendant ☐ plaintiff	shall sign a quit □ defendant.	claim deed to the propert	y within 30 days of entry of the ju	udgment for		

JUDGMENT OF DIVORCE

CASE NO. and	1.	JU	יט	GI
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JUDICIAL CIRCUIT COUNTY	WITH CHILDREN INCOME TAX ADDENDUM				
Court address					Court telephone no
Plaintiff name		v	Defendant name		
Income tax deductions, credits, and ex	remptions shall be di	vided	d as follows (check	one).	
The parent with whom the child(rendeductions, credits, and exemption Publication 501.					
OR					
☐ The plaintiff is awarded the income	tax deductions, cred	dits, a	and exemptions for	the minor child(ren)	, including state,
federal,or local tax returns, for all ta	ax years, beginning in	n the	year	. •	
OR					
☐ The defendant is awarded the inco	me tax deductions, c	redit	s, and exemptions	for the minor child(re	en), including state,
federal or local tax returns, for all ta	ax years, beginning in	n the	year	. •	
OR					
☐ The plaintiff is awarded the income	tax deductions, crec	dits, a	and exemptions for	the following minor	child(ren)
and the defendant is awarded the i	ncome tax deduction	ıs, cr	edits, and exemption	ons for the following	minor child(ren),
including state, federal or local tax	returns, for all tax ye	ars,	beginning in the yea	ar	

OR

Judgment of Divorce, With Children Income Tax Addend Page 2 of 2	dum (7/21)		Case No.	
\Box The plaintiff and defendant shall each claim a	all the income	tax deductions, cr	edits, and exemption(s) in alternating	years,
beginning in the year with the	□plaintiff	defendant	claiming all income tax deductions, co	redits,
and exemption(s) for the minor child(ren), inc	cluding state,	federal, and local	tax returns for even-numbered tax ye	ars
and the \Box plaintiff \Box defendant \Box	claiming all in	come tax deduction	ons, credits, and exemption(s) for the	minor
child(ren), including state, federal, and local	tax returns fo	r odd-numbered t	ax years.	

2nd copy - Plaintiff 3rd copy - Return

STATE OF MICHIGAN	JUDGMENT OF DIVORCE	CASE NO.
	PENSION/RETIREMENT ACCOUNT ADDENDUM	
Court address		Court telephone no.
Plaintiff name	V Defendant name	

Instructions for the Judgment of Divorce, CC-MLH 413 or CC-MLH 412

Your Judgment of Divorce is the final order in your divorce case. It must be completed by the Plaintiff and signed by the judge before your divorce is final. It must state all the terms of your divorce, including those dealing with division of property and debt, and spousal support (if agreed upon or awarded by the court). If your divorce includes minor children, the Judgment must also include provisions for child custody, parenting time, and child support. Be sure to complete any Judgment addenda (for example, the Personal Property and Debt Addendum, Vehicle Addendum, Real Property Addendum, Pension/Retirement Account Addendum, Income Tax Addendum, Parenting Time Addendum) that apply to your case. These are part of your Judgment of Divorce.

Read the article <u>How to Fill Out, Serve, and File Court Forms</u> for help filling out the caption (the top part) of your Judgment of Divorce.

If you and your spouse agreed on all the terms of your divore, your Judgment should include all of your agreements. If your case went to trial on certain issues because you and your spouse could not agree, your Judgment must include everything the judge ordered in addition to any terms that you and your spouse agreed on. If your spouse was defaulted, then the Judgment provisions will be based on what you (the Plaintiff) are asking the judge to order.

It is very important for the Judgment of Divorce to contain the exact terms of your agreements. If the other party fails to do something that you agreed on, the judge can only enforce what is written in the Judgment. It is not easy to ask the court to change a Judgment of Divorce if it was not completed correctly the first time.

If you need help filling out your Judgment of Divorce or want it to be reviewed by a lawyer, use the <u>Guide to Legal Help</u> to get lawyer referral information. If you have questions about the Judgment of Divorce form, you can ask Michigan Legal Help using our LiveHelp chat.

To read instructions about what to do with the form once you have completed it, go to the toolkit page that applies to you: <u>Divorce without Minor Children</u> or <u>Divorce with Minor Children</u>. To see the instructions, scroll past the Common Questions until you see the "Checklist" heading. Select your county, and then step-by-step instructions for each step of the divorce process will appear.

3rd copy - Friend of the court 4th copy - Proof of service 5th copy - Proof of service

STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY

ORDER REGARDING CUSTODY AND PARENTING TIME

	5th copy - Proof of service	
(A)	CASE NO.	

Co	urt address Court telephone no.
B	Plaintiff's name, address, and telephone no. V Defendant's name, address, and telephone no.
	Third party's name, address, and telephone no. C Date: Judge:
D	1. This order is entered
E	THE COURT FINDS: 2. A motion requesting custody, parenting time, and support or a change to custody, parenting time, and support was filed.
	\square 3. A response to the motion was filed.
	\Box 4. A change of circumstances \Box does \Box does not exist that warrants a custody order or a change in custody.
	☐ 5. Proper cause ☐ does ☐ does not exist that warrants a custody order or a change in custody.
	\square 6. It \square is \square is not in the best interests of the child(ren) to \square establish \square change parenting time.
	\square 7. A material change of circumstances exists that warrants a change in the support order.
	☐ 8. The parties met through the friend of the court alternative dispute resolution process. During the course of the alternative dispute resolution process the parties reached the agreement set forth in this order.
	\square 9. It is in the best interests of the child(ren) to dismiss the motion.
	IT IS ORDERED: ☐ 10. The motion regarding custody, parenting time, and support is dismissed. The prior order remains in effect.
	☐ 11. Custody is granted as follows: Name(s) of child(ren): ☐ Joint legal to ☐ plaintiff. ☐ defendant. ☐ third party.
	Unless otherwise agreed, a parent whose custody or parenting time of a child is governed by this order shall not change the legal residence of the child except in compliance with MCL 722.31.
	☐ Joint physical to☐ plaintiff.☐ defendant.☐ third party.☐ Sole legal to☐ plaintiff.☐ defendant.☐ third party.
	☐ Sole physical to ☐ plaintiff. ☐ defendant. ☐ third party.
12	2. Parenting time is established. changed as follows: Explain in detail what the court has ordered.

will, directly or indirectly, influence a child so to guide a child so as to promote the affection cooperate with each other in carrying out the necessary to adjust, vary, or increase the time the parties shall act in the best interests of the	rd a child the as to prejudionate relations on provisions one allotted to the child. Neith	in a maximum degree, to advance a child's haffection of both parents and a sense of secuce a child against the other parent. Each pareship between a child and the other parent. The fithis order for a child's best interests. Wheneverther party, or otherwise take action regarding the party shall do anything which may estrangation will hamper the free and natural develop	urity. Neither parent ent will endeavor he parties will ever it seems hg a child, each of ge the other from
 The parent with primary physical custody sh child changes. The domicile of the minor chi court. 		riend of the court in writing whenever the add moved from the State of Michigan without p	
\Box 15. The Uniform Child Support Order is incorp	porated by ref	erence (form FOC 10/52).	
16. Except as provided in item 17, neither paren to the Hague Convention on the Civil Aspect			hat is not a party
\square 17. Based on written agreement of the parties	S,		may exercise
parenting time in		, which is not a party to the Hague Co	onvention on the
Civil Aspects of International Child Abduct	tion.		
Plaintiff (if consent/stipulation)	Date	Defendant (if consent/stipulation)	Date
Plaintiff's attorney	Date	Defendant's attorney	Date
Prepared by: Name (type or print)			
Date		Judge	
	CERTIFICAT	E OF MAILING	
I served a copy of this order on the parties or t defined by MCR 2.107(C)(3). I declare under the and that its contents are true to the best of my in	e penalties of	perjury that this certificate of mailing has been	
Date		Signature	
	COURT	USE ONLY	

Case No.

Order Re: Custody and Parenting Time (2/20) Page _____ of ____

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	UNIFORM CHILE EX PARTE MODIFICATION		PPORT ORDER TEMPORARY FINAL	CASE NO. and JUDGE
Court address				Court telephone no.
Plaintiff's name, address, and telephone no.		v	Defendant's name, addre	ess, and telephone no.
Plaintiff's attorney, bar no., address, and teleph	one no.		Defendant's attorney, bar	no., address, and telephone no.
Plaintiff's source of income name, address, and telephone no.			Defendant's source of inc	come name, address, and telephone no.
This order is entered ☐ after hear ☐ The friend of the court recommend ☐ If you disagree with this recommer 21 days from the date this order is entry. ☐ Attached are the calculations pursuant IT IS ORDERED, unless otherwise or ☐ Standard provisions have been in ☐ Standard provisions have been i	s child support be ord ndation, you must file s mailed. If you do not uant to MCL 552.505(dered in item 11 or 12	ered a wi obje 1)(h	d as follows. itten objection with _ ect, this proposed ord) and MCL 552.517b	der will be presented to the court for
1. The children who are supported Payer:	under this order and		e payer and payee a	ire:
Children's names and annual overnigh Children's name				Overnights
Effective,	the payer shall pay a	mor	nthly child support ob	ligation for the children named above.
Approved, SCAO			Distribute form to:	

Approved, SCAO Form FOC 10/52, Rev. 7/21 MCL 552.14, MCL 552.517, MCL 552.517b(3), MCL 552.517f, MCR 3.211 Page 1 of 4

Distribute form to: Court Plaintiff Defendant Friend of the court

Uniform Child Support Order (7/21) Page 2 of 4			Case No.						
	Item 1 (continu	ed).							
Chi	Idren supported	 d:	1 child	2 children		3 children	4 children	5 or m	ore children
			support plus or	minus premium ad	djustm	ent for health-ca	re insurance)		
	upport:	\$		\$	\$		\$	\$	
	emium adjust:	\$		\$	\$		\$	\$	
1	ubtotal:	\$		\$	\$		\$	\$	
	linary medical:	\$		\$	\$		\$	\$	
i	ld care:	\$		\$	\$		\$	\$	
Oth		\$		\$	\$		\$	\$	
	nefit credit:	\$		\$	\$		\$	\$	
Tot		\$		<u> </u> \$	\$		\$	\$	
	Support was red	aucea	because payer	s income was redu	ucea.				
	be paid ordinary medica	I amou	% by the plaintiff int for the year th	I uninsured health-c and ey are incurred that annual ordinary me	% by the	ne defendant. Uni ot paid within 28 d	nsured expenses ays of a written pa	exceeding the ayment reque	ne annual est may be
•	18 years of follows, ex	ority Sof age.	Support: The fol Therefore, the	llowing children wi support obligation it extend beyond th on ends.)	for ea	ch specific child	ends on the last	day of the n	nonth as
1	friend of the co following the ch	urt if th	e changes end 2th birthday, at v	each other of chang those expenses. I which time the tota er.	The ch al child	ild-care obligatio	n for each child	ends on Aug	just 31
[coverage (as def when that cove net cost of addi up to a maxil	ined in I rage is ng the mum o	MCL 552.602) that accessible to to children to the of \$	efit of the children includes payment he child and availa parent's coverage for plaintiff. defendant's gross i	t for ho able at	ospital, dental, op a reasonable co ີ up to a maximu	otical, and other est. The reasona	health-care of the cost is the	expenses ne parent's
				olding takes immed ordered in item 12		ffect. Payments s	shall be made th	rough the Mi	ichigan State
				his order is a qual					

5. Retroactive Modification, Surcharge for Past-Due Support, and Liens for Unpaid Support. Except as provided by MCL 552.603, support is a judgment the date it is due and is not modifiable retroactively. A surcharge may be added to past-due support. Unpaid support is a lien by operation of law and the payer's property can be encumbered or seized if an arrearage accrues in an amount greater than the periodic support payments payable for two months under the payer's support order.

parent may contest the notice by requesting a review or hearing concerning availability of health care at a reasonable

Uniform Child Support Order (7/21) Page 3 of 4	Case No
6. Address, Employment Status, Health Insurance. Both paramailing and residential addresses and telephone numbers; their sources of income; c) their health-maintenance or insurcontract numbers; d) their occupational or driver's licenses; a pursuant to MCL 552.603. Both parties shall notify the friend information. Failure to do so may result in a fee being impose	o) the names, addresses, and telephone numbers of ance companies, insurance coverage, persons insured, or and e) their social security numbers unless exempt by law of the court in writing within 21 days of any change in this
7. Foster-Care Assignment. When a child is placed in foster of Department of Health and Human Services while under the sa county-funded program.	
8. Redirection and Abatement. As provided by MCL 552.6050 may redirect support paid for a child to the person who is prochild, and shall abate support charges to zero for a child who the payer of support will be incarcerated for 180 consecutive.	oviding the actual care, support, and maintenance of that o resides on a full-time basis with the payer of support or if
	ula, monthly support charges shall abate and be temporarily irt office provides notice of the abatement to the parties and 60 days after the incapacitation ends. The office shall
	t by filing a written objection with the court within 21 days f a timely objection is received, the friend of the court shall eview with an effective date no earlier than the date of filing
Based on a motion by either party or a recommendation for abated may be later corrected based on the parties' incompared to the parties of th	
9. Fees. The payer of support shall pay statutory and service fe	ees as required by law.
10. Review. Each party to a support order may submit a written friend of the court is not required to act on more than one re also file a motion to modify this support order.	
☐ 11. Michigan Child Support Formula Deviation. The supp	oort provisions ordered do not follow the Michigan Child

Support Formula. The attached deviation addendum (FOC 10d) provides the basis for deviation and the required

findings by the court.

☐ 12. **Other:** (Attach separate sheets as needed.)

Uniform Child Support Order (7/21) Page 4 of 4	Case No
	support orders and all continuing provisions are restated support order in this case are preserved and paid at the rate in Child Support Formula.
	Judge signature and date
Plaintiff (if consent/stipulation) Date	Defendant (if consent/stipulation) Date
Plaintiff's attorney Date	Defendant's attorney Date
Prepared by: Name (type or print)	
CERTIFICAT	E OF MAILING
known addresses as defined by MCR 3.203. \square I also serve	rties or their attorneys by first-class mail addressed to their last- d the Deviation Addendum (FOC 10d) with this order. I declare has been examined by me and that its contents are true to the
Date	Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	UNIFORM CHILE EX PARTE MODIFICATION		IPPORT ORDER TEMPORARY FINAL	CASE NO. and JUDGE
Court address				Court telephone no.
Plaintiff's name, address, and telephone no.		v	Defendant's name, addre	ess, and telephone no.
Plaintiff's attorney, bar no., address, and telepho	one no.		Defendant's attorney, bar	no., address, and telephone no.
Plaintiff's source of income name, address, and	I telephone no.		Defendant's source of inc	come name, address, and telephone no.
This order is entered ☐ after hear ☐ The friend of the court recommend ☐ If you disagree with this recommer 21 days from the date this order is entry. ☐ Attached are the calculations pursuant IT IS ORDERED, unless otherwise or ☐ Standard provisions have been in ☐ Standard provisions have been i	s child support be ord ndation, you must file s mailed. If you do not uant to MCL 552.505(dered in item 11 or 12	lered a wi cobject 1)(h	d as follows. ritten objection with _ ect, this proposed ord) and MCL 552.517b	der will be presented to the court for
1. The children who are supported Payer:	under this order and		e payer and payee a	ire:
Children's names and annual overnigh Children's name				Overnights
Effective,	the payer shall pay a	mor	nthly child support ob	ligation for the children named above.
Approved, SCAO			Distribute form to:	

Approved, SCAO Form FOC 10/52, Rev. 7/21 MCL 552.14, MCL 552.517, MCL 552.517b(3), MCL 552.517f, MCR 3.211 Page 1 of 4

Distribute form to: Court Plaintiff Defendant Friend of the court

Uniform Child Support Order (7/21) Page 2 of 4						Case No				
	Item 1 (continu	ed).								
Chi	Idren supported	 d:	1 child	2 children	3	children	4 children	5 or more chil	dren	
			support plus or	minus premium ad	justment	for health-car	e insurance)			
	upport:	\$		\$	\$		\$	\$		
	emium adjust:	\$		\$	\$		\$	\$		
1	ubtotal:	\$		\$	\$		\$	\$		
	linary medical:	\$		\$	\$		\$	\$		
i	ld care:	\$		\$	\$		\$	\$		
Oth		\$		\$	\$		\$	\$		
	nefit credit:	\$		\$	\$		\$	\$		
Tot		\$		<u> </u> \$	\$		\$	\$		
	Support was red	aucea	because payer:	s income was redu	cea.					
	be paid ordinary medica	l amou	% by the plaintiff int for the year th	uninsured health-ca and9 ey are incurred that annual ordinary med	% by the o are not pa	defendant. Unir aid within 28 da	nsured expenses a sys of a written pa	exceeding the annument request may	al be	
•	18 years of follows, ex	ority Sof age.	Support: The fol Therefore, the	llowing children will support obligation t t extend beyond th on ends.)	for each	specific child	ends on the last	day of the month a		
1	friend of the co following the ch	urt if th	e changes end 2th birthday, at v	ach other of chang those expenses. T which time the total er.	he child- I child ca	care obligatior	n for each child e	nds on August 31		
[coverage (as def when that cove net cost of addi up to a maxil	ined in large is not not included in the including including in the including including in the including including in the including includ	MCL 552.602) that s accessible to the children to the of \$	efit of the children, includes payment he child and availal parent's coverage for plaintiff. lefendant's gross in	for hospi ble at a r □ u _t	tal, dental, op easonable cos	tical, and other h	ealth-care expense ole cost is the pare	es	
				lding takes immedi ordered in item 12.	ate effec	t. Payments s	hall be made thr	ough the Michigan	State	
				his order is a qualit e friend of the cour						

5. Retroactive Modification, Surcharge for Past-Due Support, and Liens for Unpaid Support. Except as provided by MCL 552.603, support is a judgment the date it is due and is not modifiable retroactively. A surcharge may be added to past-due support. Unpaid support is a lien by operation of law and the payer's property can be encumbered or seized if an arrearage accrues in an amount greater than the periodic support payments payable for two months under the payer's support order.

parent may contest the notice by requesting a review or hearing concerning availability of health care at a reasonable

Uniform Child Support Order (7/21) Page 3 of 4	Case No
6. Address, Employment Status, Health Insurance. Both paramailing and residential addresses and telephone numbers; their sources of income; c) their health-maintenance or insurcontract numbers; d) their occupational or driver's licenses; a pursuant to MCL 552.603. Both parties shall notify the friend information. Failure to do so may result in a fee being impose	o) the names, addresses, and telephone numbers of ance companies, insurance coverage, persons insured, or and e) their social security numbers unless exempt by law of the court in writing within 21 days of any change in this
7. Foster-Care Assignment. When a child is placed in foster of Department of Health and Human Services while under the sa county-funded program.	
8. Redirection and Abatement. As provided by MCL 552.6050 may redirect support paid for a child to the person who is prochild, and shall abate support charges to zero for a child who the payer of support will be incarcerated for 180 consecutive.	oviding the actual care, support, and maintenance of that o resides on a full-time basis with the payer of support or if
	ula, monthly support charges shall abate and be temporarily irt office provides notice of the abatement to the parties and 60 days after the incapacitation ends. The office shall
	t by filing a written objection with the court within 21 days f a timely objection is received, the friend of the court shall eview with an effective date no earlier than the date of filing
Based on a motion by either party or a recommendation for abated may be later corrected based on the parties' incompared to the parties of th	
9. Fees. The payer of support shall pay statutory and service fe	ees as required by law.
10. Review. Each party to a support order may submit a written friend of the court is not required to act on more than one realso file a motion to modify this support order.	
☐ 11. Michigan Child Support Formula Deviation. The supp	oort provisions ordered do not follow the Michigan Child

Support Formula. The attached deviation addendum (FOC 10d) provides the basis for deviation and the required

findings by the court.

☐ 12. **Other:** (Attach separate sheets as needed.)

Uniform Child Support Order (7/21) Page 4 of 4	Case No				
	support orders and all continuing provisions are restated support order in this case are preserved and paid at the rate in Child Support Formula.				
	Judge signature and date				
Plaintiff (if consent/stipulation) Date	Defendant (if consent/stipulation) Date				
Plaintiff's attorney Date	Defendant's attorney Date				
Prepared by: Name (type or print)					
CERTIFICAT	E OF MAILING				
known addresses as defined by MCR 3.203. \square I also serve	rties or their attorneys by first-class mail addressed to their last- d the Deviation Addendum (FOC 10d) with this order. I declare has been examined by me and that its contents are true to the				
Date	Signature				

Form FOC 10/52 and Form FOC 89

UNIFORM CHILD SUPPORT ORDER AND ORDER REGARDING CUSTODY AND PARENTING TIME

Use this form if:

- you had a hearing on your Motion Regarding Custody (form FOC 87) and both you and the other party (and a third party) agree to sign the order without another hearing; or
- you had a hearing on your Motion Regarding Custody (form FOC 87) and the other party (and a third party) will not sign the order; or
- you and the other party (and a third party) have agreed on the custody, parenting time, and support and want the court to sign your proposed order without having to file a motion and attend a hearing on the motion.

ORDER CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

1.	Fill out all requested information on the form?	YES □
2.	Make all necessary copies?	YES □
3.	Get the judge's signature? (NOTE: See pages 3-5 for details)	YES □
4.	Return to the clerk's office with all copies of the signed order?	YES □
5.	Make sure the clerk stamps all copies of the signed order?	YES □
6.	Keep one copy of the signed order for yourself?	YES □
7.	Mail (serve) a copy of the order on the other party and on any other custodian/guardian after it was stamped by the clerk?	YES 🗆
8.	Give two copies of the completed form to the clerk of the court?	YES □

If you cannot answer "yes" to all the above steps, you do not have a valid order.

By using this form packet you are representing yourself in a court action regarding custody, parenting time, and support. In order to receive the action you seek, you must follow the instructions in this packet. If you fail to do even one of the required steps, the order you get from the court may not give you the custody you want. **NOTE:** Regardless of the custody you ask for, the court is required to use the Child Custody Act in deciding what custody should be. If you filed the motion form FOC 87, you are responsible for preparing the order even if it is not what you asked for.

If you have any questions about any steps in the process, refer to pages 3 through 5 of this booklet for details.

What instructions are in this packet:

Pages 3 and 4 - Instructions for getting a stipulated (mutually agreed upon) order signed. Pages 5 - Instructions for getting an order signed after a hearing.

INSTRUCTIONS FOR GETTING A STIPULATED (MUTUALLY AGREED UPON) ORDER SIGNED (when both parties have signed the order without a hearing)

»» SIGNING AND FILING OF ORDER

NOTE: A hearing on a stipulated order is not necessary unless the judge requests it.

1. Fill out the order form.

Use the instructions on page 6. Be careful not to make mistakes.

Make at least five copies of the form after you have filled it out.

2. Approval by friend of the court.

In some courts the order has to be approved by the friend of the court before the judge will sign it. Contact the friend of the court office and ask if the order must be approved by the friend of the court. Then complete either step a or b below.

- a. If the order must be approved by the friend of the court, go to the friend of the court office with the original and five copies of the order. Leave the order with the office. Someone from the office should tell you when to come back for the order or should call you when the order has been approved. If you do not hear from the office within 5 days, contact the office to find out when to pick up the order. Go back and pick up the order. Then complete step 3 below.
- b. If the order does not need to be approved by the friend of the court, complete step 3 below.

3. Get the order to the judge and get signed copies.

Since the other party or third party has signed the order, contact the clerk of the court for instructions to get the order signed by the judge. Listen carefully to all the instructions for getting the order signed. Every circuit has a different way of handling the signing of orders. Ask how to get at least four copies of the order after it is signed by the judge.

»» SERVING THE ORDER ON THE OTHER PARTY OR PARTIES

1. Serve the signed order on the other party.

The other party must be served with (notified of) one copy of the signed order.

NOTE: Serve the papers by mailing them to the other party by first-class mail.

What you need for service:

One copy of FOC 10/52 and 89 - for the other party
Two copies of FOC 10/52 and 89 - for proof of service
Any additional copies of FOC 10/52 and 89 - for other custodian or guardian if there is someone other than the other parent who has care or custody of the child(ren)

Mail one copy to the other party. If there is a custodian or guardian, mail one copy to that person. Then fill out the Certificate of Mailing on the front of the remaining three copies. Keep one copy for your own records.

2. Return to the county clerk.

Once you have mailed the order and filled out the Certificate of Mailing on the remaining three copies, return to the county clerk's office with two copies. Remember to keep one copy for your own records. The clerk will deliver one copy to the friend of the court.

INSTRUCTIONS FOR GETTING THE ORDER SIGNED AFTER A HEARING

»» SIGNING AND FILING OF AN ORDER

1. Fill out the order form.

Normally you will fill out the order at the hearing on the motion. Use the instructions on page 6. Be careful not to make mistakes.

Make copies of the form based on the instructions on either page 3 of this booklet or in booklets for forms FOC 53 or FOC 54 depending on your situation.

2. Approval by friend of the court.

In some courts the order has to be approved by the friend of the court before the judge will sign it. Contact the friend of the court office and ask if the order must be approved by the friend of the court. Then complete either step a or b below.

- a. If the order must be approved by the friend of the court, go to the friend of the court office with the original and five copies of the order. Leave the order with the office. Someone from the office should tell you when to come back for the order or should call you when the order has been approved. If you do not hear from the office within 5 days, contact the office to find out when to pick up the order. Go back and pick up the order. Then complete step 3 below.
- b. If the order does not need to be approved by the friend of the court, complete step 3 below.

3. Get the order signed by the judge.

After you have filled out the order, you must have it signed by the judge. If both you and the other party sign the order to show you both approve the order, then go to pages 3 and 4 of this booklet for further instructions on getting the order signed by the judge. Otherwise you must do either of the following:

- a. Schedule and attend a hearing to get the order signed.

 (Use the packet for form FOC 53, Notice of Hearing to Enter Order.)
- b. Notify the other party in writing that the order will be given to the judge to sign and that he or she has 7 days to file any written objections. If no objections are filed by the other party, the order can be signed.

(Use the packet for form FOC 54, Notice to Enter Order without Hearing.)

INSTRUCTIONS FOR COMPLETING "ORDER REGARDING CUSTODY AND PARENTING TIME" AND "UNIFORM CHILD SUPPORT ORDER"

Please print neatly. After filling in the form, you will need to make copies. Items A through E and form FOC 10/52 must be completed before the order can be given to the judge for signature. Please read the instructions for each item. Then fill in the correct information for that item on the form.

- A Before you fill in the Case No., get your copy of the Motion (form FOC 87) or your court papers for custody, divorce, annulment, separate maintenance, family support, or paternity. Copy the Case No. from that paper onto this form.
- B Also use your court papers to fill in the "Plaintiff" and "Defendant" boxes and, if applicable, the "Third Party" box. Copy the names from these court papers onto all pages of this form. For example, if your name is in the box that says "plaintiff," then you should write your name in the "plaintiff" box on this order form.
- © Fill in this information only if there was a hearing on a Motion Regarding Custody.
- **D** If you filed a Motion Regarding Custody (form FOC 87) and the other party will not sign the order, a hearing to enter the order is required. Check the box "after hearing."

If you filed a Motion Regarding Custody (form FOC 87) and the other party will sign the order without a hearing to enter the order, check the box "on consent of the parties."

If you and the other party are filling out this order based on an agreement between both of you and you are not filling a motion with the court, check the box "on consent/stipulation of the parties." Even if you have checked this box, the court may still require a hearing. If a hearing is required, follow the directions on scheduling a hearing in the booklet for form FOC 53, Notice of Hearing to Enter Order.

E Check the box for item 2 only if you filed a Motion Regarding Custody (form FOC 87). Check the box for item 3 only if the other party filed a Response to Motion Regarding Custody (form FOC 88). Use the following instructions for items 4 through 17.

Check only those boxes that say what the judge or referee ordered at the hearing on the motion. Then write in the blank spaces provided what the judge or referee ordered at the hearing. This information must state as closely as possible the exact words of the judge or referee. Use the notes you took at the hearing when filling out this part of the order form.

If you did not check item 2, you and the other party are stipulating to the order. This means that you both have agreed on what you want the court to order and have not filed a motion. Since there may not be a hearing, you must write in as much detail as possible exactly what you agree on. Make sure you include everything you agreed on. Anything that you do not write down on this form will not be ordered even if you and the other party had agreed on it. If the parties agreed to parenting time in a foreign country/nation that is not a party to the Hague Convention, check item 17, then write the names of the parent and the foreign country/nation.

Complete FOC 10/52 using the instructions for that form. Note that the most recent support order supersedes all prior orders regarding support and that all continuing support provisions must be restated in the most recent order.

If you filed a motion (form FOC 87) and the other party has agreed to sign the order without a hearing to enter the order, both you and the other party must sign the order. If the other party will not sign the order without a hearing to enter the order, follow the directions on scheduling a hearing in the booklet for form FOC 53, Notice of Hearing to Enter Order. If you and the other party are stipulating to the order, you both must sign the order.

Some courts require the friend of the court to approve the order before the judge will sign it. To find out if this is required, contact the friend of the court office. If it is required, see either page 3 or 5 of this booklet for directions on getting the friend of the court's approval. To find out how to get the order signed, contact the friend of the court office for instructions. See either page 3 or 5 of this booklet for details. On the date you serve a copy on the other party, write in the date and sign your name on the remaining three copies.

Return to the county clerk with two copies.

You must read this booklet and other booklets dealing with orders for directions on the legal process.

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	ILIDGMENTINE	C RELATIONS FORMATION, PAGE 1	CASE NO.	CASE NO.		
	TEMPORARY	☐ FINAL				
USE NOTE: Complete this form an when the first temporary custody, awarding custody, parenting time, 302, Proof of Mailing). The information previously provided	parenting-time, or support or support. Mail a copy to e	order is entered and wheach party and file proo	nen submitting any final prop	osed judgment ay use form MC		
Date	_	Signature	,			
Plaintiff Information		Defendant Informati	on			
Name		Name				
Address		Address				
Social security number Telephone num	nber	Social security number	Telephone number			
E-mail address		E-mail address				
Employer name, address, telephone numb	per, and FEIN (IT Known)		, telephone number, and FEIN (if k	nown)		
Driver's license number and state		Driver's license number and state				
Occupational license number(s), type(s),	issuing state(s), and date(s)	Occupational license number(s), type(s), issuing state(s), and date(s)				
CUSTODY PROVISIONS sol	e, plaintiff = P sole, defendant =	$D joint = J other = O \frac{1}{(r)}$	must identify)			
Child's name S	Social security Date of birth number	Physical Child's custody P, D, J, O	s primary residence address	Legal custody P, D, J, O		

SUPPORT PROVISIONS

 $\hfill \square$ Support provisions are stated in the Uniform Support Order. Medical Support provisions are stated on page 2 of this form.

Original - Friend of the court Copies - All parties

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	DOMESTIC F JUDGMENT INFOR		CASE NO.
		☐ FINAL	

MEDICAL SUPPORT PROVISIONS: List the name of each insurance provider for the plaintiff and the defendant. Then enter the name of each child in this case who is covered by that provider and the type of coverage provided.

Plaintiff's	<u>Insurance (</u>	Coverage

Approved, SCAO

Plaintiff's insurance Covers			0				
Provider name and address	Policy/Group no.	Cert. no.	Child(ren)'s name(s)	Medical	Dental	Optical	Other

Defendant's Insurance Coverage

Provider name and address	Policy/Group no.	Cert. no.	Child(ren)'s name(s)	Medical	Dental	Optical	Other

Approved, SCAO

STATE OF MICHIGAN JUDICIAL CIRCUIT COLINTY

VERIFIED STATEMENT

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	CC	JONTI									
Parent's last name)	First nam	ne		М	iddle na	ame		2. Any ot	her na	ames by which parent is or has been known
3. Date of birth			4. Social security number 5. Driver's license number and state								Driver's license number and state
6. Mailing address a	and residence	address (if di	fferent)								
7. E-mail address											
8. Eye color 9. I	Hair color	10. Height	11 \	Veight	12	Race	13 G	ender	14. Scars,	tattoo	os etc
, l		_									
15. Mobile telephone	no.	16. Home tele	phone r	10.		17. W	ork te	lephone	e no.	18.	. Occupation
19. Business/Employ	er's name an	d address				•				20.	. Gross weekly income
21. Did this parent a		ceive public as	sistance	e? If yes	s, pleas	se spec	ify kin	d and d	case numbe	r.	
22. Other parent's las		First nam	ie		М	iddle na	ame		23. Any	other	names by which parent is or has been known
24. Date of birth			25	. Social	securit	y numb	oer			26.	Driver's license number and state
27. Mailing address	and residenc	e address (if c	lifferent)								
28. E-mail address											
29. Eye color 30.	Hair color	31. Height	32.	Weight	33.	Race	34. 0	ender	35. Scars	, tattoo	os, etc.
36. Mobile telephone	no.	37. Home tele	phone r	10.		38. W	Vork te	lephon	e no.	39	9. Occupation
40. Business/Employ	ver's name an	d address								41	. Gross weekly income
42. Did this parent a		ceive public as	sistance	e? If yes	s, pleas	se spec	ify kin	d and c	ase numbe	r.	
		Lin casa	M/F	b. Birth	h data		Λαο	d S00	. sec. no.	A R	esidential address
45. a. Name and Sex	OI IIIIIIOI CIIIO	I III Case	IVI / F	D. DIIII	ii dale	C	. Age	u. 300	. Sec. no.	6. 10	esideritiai address
44. a. Name and sex	of other mind	r child of eithe	r party	M/F b	o. Birth	date	С	. Age	d. Residenti	ial add	dress
45 Haalth			امائمام س								
45. Health care cover				Ja.,		Name	-f:		/! !!\		d Delian/Contificate/Contract/Contract
a. Name of minor chi	Id	b. Name of po	olicy noic	aer	C.	ivame	or ins	urance	co./HMO		d. Policy/Certificate/Contract/Group no.
46. Name(s) and ad	dress(es) of	person(s) othe	r than p	arties, if	f any, w	/ho ma	y have	e custo	dy of child(ren) dı	uring pendency of this case.
I declare that the	statements	above are t	rue to	the bes	st of m	y info	rmati	on, kn	owledge,	and b	belief.

Date Signature If any of the public assistance information above changes before your judgment is entered, you are required to give the friend of the court written notice of the change. If you want child support services, complete form DHS 1201-D, available at your local friend of the court office or courts.mi.gov/Administration/ $\underline{SCAO/Forms/court forms/domestic relations/general foc/dhs1201d.pdf}$