

STATE OF MICHIGAN  
20<sup>TH</sup> JUDICIAL CIRCUIT COURT  
Ottawa County Clerk / Register of Deeds  
12240 Filmore Street, Suite 50, West Olive MI 49460  
616-846-8320

**OBJECTION TO MISCELLANEOUS FOC ORDER**

**{A}**

Plaintiff's Name:  Address:  Phone Number:	v	Defendant's Name:  Address:  Phone Number:
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**{B}** FILE NO: \_\_\_\_\_

**{C}** ☐ Plaintiff's objection      ☐ Defendant's objection      **{D}** DATE ORDER MAILED: \_\_\_\_\_

**{E}** I am \_\_\_\_\_ am not \_\_\_\_\_ represented by an attorney

Attorney signature, if applicable (**MUST** be signed if represented by an Attorney) \_\_\_\_\_

**PLEASE NOTE: If you or your attorney are filing an objection to this order you must use MiFILE to file an objection. Use this form for the objection and e-file it at <https://mifile.courts.michigan.gov>. IF THE OBJECTION IS NOT PROPERLY EFILED WITH CIRCUIT COURT RECORDS, THE RECOMMENDED ORDER MAY BE INCORRECTLY SUBMITTED FOR ENTRY**

**IF YOU REQUIRE AN INTERPRETER YOU MUST NOTIFY THE COURT A MINIMUM OF THREE (3) DAYS PRIOR TO YOUR HEARING**

**SI NECESITA UN INTÉRPRETE, DEBE NOTIFICAR AL TRIBUNAL UN MÍNIMO DE TRES (3) DÍAS ANTES DE SU AUDIENCIA**

I request a hearing be scheduled before the Court regarding an objection to:

- ☐ **Birth Expenses**  
☐ **Other**

**{F}** REASON FOR OBJECTION: (**must be completed; use additional sheet(s) if needed**):

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You (the person objecting) must use the MiFile link above to e-file the objection

You will be notified by the Friend of the Court, by mail or e-notice of the time and date of your hearing

Date: \_\_\_\_\_

Signature: /s/ \_\_\_\_\_

☐ Plaintiff    ☐ Defendant