STATE OF MICHIGAN 20TH JUDICIAL CIRCUIT COURT

Ottawa County Clerk / Register of Deeds 414 Washington, Room 320, Grand Haven MI 49417 616-846-8320

OBJECTION TO CHILD SUPPORT RECOMMENDATION (three-year review)

| this form for the objection and e-file it at https://mifile.courts.r EFILED WITH CIRCUIT COURT RECORDS, THE RECORFOR ENTRY. IF YOU REQUIRE AN INTERPRETER YOU MUST NOTIF TO YOUR HEARING SI NECESITA UN INTÉRPRETE, DEBE NOTIFICAR AL TAUDIENCIA | | |
|---|---|--|
| Attorney signature, if applicable (MUST be signed if represented a PLEASE NOTE: If you or your attorney are filing an objectio this form for the objection and e-file it at https://mifile.courts.refiled with circuit court records, the reconforentry. IF YOU REQUIRE AN INTERPRETER YOU MUST NOTIF TO YOUR HEARING SI NECESITA UN INTÉRPRETE, DEBE NOTIFICAR AL TAUDIENCIA | | |
| PLEASE NOTE: If you or your attorney are filing an objection this form for the objection and e-file it at https://mifile.courts.refiled with circuit court records, the record for entry. IF YOU REQUIRE AN INTERPRETER YOU MUST NOTIF TO YOUR HEARING SI NECESITA UN INTÉRPRETE, DEBE NOTIFICAR AL TAUDIENCIA | an Attorney) | |
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| TO YOUR HEARING SI NECESITA UN INTÉRPRETE, DEBE NOTIFICAR AL TI AUDIENCIA | 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. | |
| AUDIENCIA | SI NECESITA UN INTÉRPRETE, DEBE NOTIFICAR AL TRIBUNAL UN MÍNIMO DE TRES (3) DÍAS ANTES DE SU | |
| I request a hearing to be scheduled before the Court. I object to the | | |
| I request a hearing to be scheduled before the Court. I object to the Friend of the Court's child support recommendation. | | |
| | nust be checked or if none apply, use "Other" to clearly state another is noted on this form. All information must be completely filled in, impleted, the form will be returned. | |
| ☐ The determination of ☐Plaintiff's ☐Defendant's income is in must return proof of correct income with this objection for | incorrect and should be: (if this is the reason for the objection, you orm) | |
| The determination of the child(ren)'s health insurance cost per | er month is incorrect and should be: | |
| The determination of daycare costs incurred is incorrect and sl | should be: | |
| The Michigan Child Support Formula guidelines should not be | be followed because: | |
| Other: | · | |
| | | |
| | | |
| You (the person objecting) must use the | e 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: | | |