

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	RESPONSE TO MOTION REGARDING SUPPORT	CASE NO.
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Court address Court telephone no.

Plaintiff's name, address, and telephone no.	<input type="checkbox"/> moving party
Third party name, address, and telephone no.	<input type="checkbox"/> moving party

v

Defendant's name, address, and telephone no.	<input type="checkbox"/> moving party

1. a. On _____ Date _____ a judgment
or order was entered regarding support.

b. There is currently no order regarding support.

- 2. The plaintiff defendant is ordered to pay support of \$ _____ each _____ week, month, etc. .
- 3. The plaintiff defendant is ordered to pay child care of \$ _____ each _____ week, month, etc. .
- 4. The plaintiff defendant is ordered to pay health care of \$ _____ each _____ .
- 5. I agree do not agree that conditions regarding support have changed as stated in the motion.

Explain in detail what you do not agree with and why. Include all necessary facts. Use a separate sheet of paper if needed.

- 6. I agreed with the other party to start/change support:
 - a. exactly as stated in the motion.
 - b. but not as stated in the motion.

If b. is checked, explain in detail what you did agree on. Include all necessary facts. Use a separate sheet of paper if needed.

- 7. a. I agree with what is being asked for in the motion.
- b. I do not agree with what is being asked for in the motion and ask the court to order that support be paid as follows:

If you do not agree with the request in the motion, explain in detail why and what you want the court to order. Use a separate sheet of paper if needed.

I declare that the above statements are true to the best of my information, knowledge, and belief.

Date

Responding party's signature

CERTIFICATE OF MAILING

I certify that on this date I mailed a copy of this response on the other party(ies) by ordinary mail at the above address(es).

Date

Responding party's signature