

**OTTAWA COUNTY FRIEND OF THE COURT  
414 WASHINGTON AVE – ROOM 206  
GRAND HAVEN MI 49417  
PHONE: (616) 846-8210 FAX: (616) 846-8128**

**STIPULATION REQUEST**

CLIENT'S NAME: \_\_\_\_\_

CLIENT'S PHONE NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_

OTHER PARTY'S NAME: \_\_\_\_\_

WE ARE REQUESTING SUPPORT BE SET AT \$ \_\_\_\_\_ PER MONTH,  
EFFECTIVE \_\_\_\_\_.

WE ARE REQUESTING ARREARS BE SET AT \$ \_\_\_\_\_, EFFECTIVE  
\_\_\_\_\_.

OTHER:

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\_\_\_\_\_  
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\_\_\_\_\_  
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