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

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY

RESPONSE TO MOTION REGARDING SUPPORT

$\overline{}$	
- /	
Δ)	
A /	
$\overline{}$	

CASE NO.

	COUNTY	MOTION REGARDING	SUPPORT	
Со	urt address			Court telephone no.
B	Plaintiff's name, address, and telephone no.	moving party V	Defendant's name, address, and	d telephone no moving party
	Third party name, address, and telephone no.	moving party		a judgment entered regarding support. ently no order regarding support.
D	☐ 2. The ☐ plaintiff ☐ defendant	is ordered to pay suppo	ort of \$	each month.
E	☐ 3. The ☐ plaintiff ☐ defendant	is ordered to pay child o	care of \$	each month.
F	☐ 4. The ☐ plaintiff ☐ defendant	is ordered to pay health	care of \$	each month.
H	□ 5. I □ agree □ do not agree Explain in detail what you do not agree with □ 6. I agreed with the other party to sta □ a. exactly as stated in the moti □ b. but not as stated in the moti If b is checked, explain in detail what you di	and why. Include all necessary art/change support on. on.		paper if needed.
Ī	7. ☐ a. I agree with what is being aske ☐ b. I do not agree with what is beir If you do not agree with the request in the n	g asked for in the motion		
J	Date	Respond CERTIFICATE OF	ing party's signature	
K	I certifiy that on this date I served a c their last-known addresses as define	opy of this response on th	<u> </u>	's by first-class mail addressed to
••	Date	Respond	ling party's signature	