

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	OBJECTION TO CHILD-SUPPORT REVIEW	(A) CASE NO.
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Court address FAX no. Court telephone no.

(B) Plaintiff's name, address, and telephone no. moving party

v

Defendant's name, address, and telephone no. moving party

I received a notice of child-support review from the friend of the court dated **(C)** _____
I object to the recommendation and request a hearing by the court. My objection is based on the following reason(s):

(D)

(E) _____
Date

Moving party's signature

Name (type or print)

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this objection on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

(F) _____
Date

Signature of objecting party