

Instructions for Filing a Motion Regarding Support (FOC 50)

By using this form packet, you are representing yourself in a court action regarding child support. In order to receive the action you seek, you must follow the instructions in this packet. Failure to complete ALL of the required steps, may result in a delay of your case and/or the Court being unable to grant you the relief that you are requesting.

NOTE: The Court is required to use the Michigan Child Support Formula, unless the Court finds that using the Formula would be unjust or inappropriate.

THE FRIEND OF THE COURT DOES NOT REPRESENT EITHER PARTY AND IS PROHIBITED FROM PROVIDING LEGAL ADVICE

Completing the Motion

Items A through L on the Motion Regarding Support form (FOC 50) must be completed before your motion can be filed with the Court. Please read the instruction for each item, and fill in the correct information for that item on the form. **Please print neatly. If your handwriting is not legible, the form may be rejected.**

- A. It may be helpful to have previously filed court papers available to assist you with information needed to complete this form. The case number, and party information will be listed on previous documents. If you do not know your case number, you can contact the Friend of the Court office.
- B. Enter party information just as it is listed on previous documents. For example, if your name is in the box that says "Plaintiff", then you should write your name in the "Plaintiff" box on this form. You are the moving party. Once you have written both names in the appropriate boxes, you must check the box "moving party" in the same box that your name is listed.
- C. Enter the date of the most recent order regarding support (C1a). If support has not been established, mark C1b.
- D. Check the appropriate box and fill in the amount of monthly support. **If support has not yet been established, skip to I.**
- E. Check the appropriate box and fill in the amount of monthly child care.
- F. Check the appropriate box and fill in the amount of monthly health care expenses
- G. If support was previously established, explain in detail what changes have occurred to justify a change in child support. Attach a separate sheet.
- H. If you and the other parent have agreed to a monthly child support amount, attach a separate sheet to explain the details of the agreement.

- I. Attach a separate sheet to explain in detail what you are asking the Court to order.
- J. Date and sign the form.
- K. ***Before completing the "Notice of Hearing" portion, contact the Friend of the Court Scheduling Clerk at (989) 731-7462.*** You will need to provide your name and phone number, the other party's name and your case number. Fill in the form with the name of the Judge or Referee who will be hearing your motion, the date of the hearing, the time of the hearing (include whether it is a.m. or p.m.), and the place of the hearing.

Note: All Referee Hearings will be held virtually, via Zoom. Zoom information (attached) must be included with the Notice of Hearing that is sent to the opposing party.

- L. See "Filing and Serving" Instructions below **before** dating/signing the "Certificate of Mailing" portion of the form.

Filing and Serving the Motion

1. Make three copies of the Motion Regarding Support (FOC 50) and any attachments (one for you, the other party and the Friend of the Court). If there are attorneys of record or a third party/guardian, make additional copies.
2. Mail a copy of the motion with attachments to the other party and, if appropriate, attorneys of record or third party/guardian by first class mail. **The mailing date must be at least 9 business days (not including holidays) prior to the hearing date.**
3. Complete the Certificate of Mailing (L) located at the bottom of the motion form, by signing and writing the date that you **mailed** copies to the other party(ies).
4. File the original **and** Friend of the Court copy of the Motion (with attachments) with the County Clerk's office located at 225 West Main Street, Gaylord, Michigan 49735. This may be done in person, or by mailing to the Clerk's office.

Note: A filing and order entry fee of \$60.00 will be required at the time of filing. Payment may be made with credit card, cash or check or money order (made payable to Otsego County Clerk).

If you can't afford to pay the fees, you may submit an Affidavit and Order – Suspension of Fees and Costs (Form MC 20). This form can be obtained from the Friend of the Court or County Clerk's office. If the Affidavit is approved by the Court, your filing fee may be waived.

Contact the Friend of the Court office at (989) 731-7450 or the County Clerk's office at (989) 731-7500 if you have any questions regarding the instructions for filing and serving your motion.

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	MOTION REGARDING SUPPORT	(A) CASE NO.
--	---------------------------------	---------------------

Court address Court telephone no.

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

Third party name, address, and telephone no. moving party

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

v

(C) 1. a. On _____ a judgment
Date
or order was entered regarding support.
 b. There is currently no order regarding support.

(D) 2. The plaintiff defendant is ordered to pay support of \$ _____ each month.

(E) 3. The plaintiff defendant is ordered to pay child care of \$ _____ each month.

(F) 4. The plaintiff defendant is ordered to pay health care of \$ _____ each month.

(G) 5. Conditions regarding support have changed as follows:
Use a separate sheet to explain in detail what has happened and attach. Include all necessary facts.

(H) 6. _____ and I have agreed to support as follows:
Name
Use a separate sheet to explain in detail what you have agreed on and attach. Include all necessary facts.

(I) 7. I ask the court to order that support be paid as follows: See 6 above for details.
Use a separate sheet to explain in detail what you want the court to order and attach.

(J) _____
Date Moving party's signature

NOTICE OF HEARING

A hearing will be held on this motion before _____
Judge/Referee Bar no.

(K) on _____ at _____ at _____
Date Time Location

If you require special accommodations to use the court because of a disability, or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements. When contacting the court, provide your case number(s).

Note: If you are the person receiving this motion, you may file a response. Contact the friend of the court office and request form FOC 51.

CERTIFICATE OF MAILING

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

(L) _____
Date Moving party's signature