

## Instructions for Filing a Motion Regarding Custody (FOC 87)

By using this form packet, you are representing yourself in a court action regarding custody. 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: Under the Michigan Child Support Formula, a change in custody may affect parenting time and the amount of child support that is ordered. 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 Custody form (FOC 87) 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 custody (C1a). If custody has not been established, mark C1b. Be sure to complete and attach the Uniform Child Custody Jurisdiction Enforcement Act Affidavit (MC416) pursuant to C2. See separate instructions, below.
- D. Check the appropriate box as to who currently has custody of the child(ren). If custody has not been established, skip to E.
- E. Fill in the blanks completely.
- F. If you are seeking a change in custody, explain in detail how the family situation has **changed**. Use a separate sheet of paper, if necessary, and print your explanation clearly and neatly. You will need four (4) copies of this sheet to attach to copies of this form. If you are seeking to establish custody, skip to G.

- G. If you are asking the Court to establish custody, explain why you think it is in the best interests of the child(ren) for the Court to give you custody. Use a separate sheet of paper if necessary, and print your explanation clearly and neatly. You will need four (4) copies of this sheet to attach to copies of this form.
  - H. If you and the other parent have agreed to custody, support and parenting time, provide an explanation in as much detail as possible as to your agreement. Use a separate sheet of paper, if necessary, and print clearly and neatly. You will need four (4) copies of this sheet to attach to copies of this form.
  - I. Explain in detail what you are requesting the Court to order. Use a separate sheet of paper, if necessary, and print your explanation clearly and neatly. You will need four (4) copies of this sheet to attach to copies of this form.
  - 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.

**Completing the Uniform Child Custody Jurisdiction Enforcement Act Affidavit**

- A. Fill in the case number and case name. 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.
- B. Complete items 1 – 3.
- C. Complete items 4 – 6 providing the information requested concerning any prior determination by a court regarding custody or parenting time, any pending proceedings, and any person claiming rights of legal or physical custody or parenting time with the child(ren) other than a party in this case. Check any of the boxes that apply.
- D. Under item 7, write the home state where the child(ren) reside.
- E. Only check box 8, if appropriate.
- F. Sign and print your name, and complete your address in front of a Notary. The notary will complete the bottom portion of the form.
- G. Make three (3) copies of the completed Uniform Child Custody Jurisdiction Enforcement Act Affidavit (MC416). An additional copy may be necessary if the other party is represented by an attorney.

### **Filing and Serving the Motion and UCC (MC416)**

1. Make three copies of the Uniform Child Custody Jurisdiction Enforcement Act Affidavit (MC416). Motion Regarding Custody (FOC87) and any attachments to the motion (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 and UCC 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) and UCC form 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 \$100.00 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.



<b>STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY</b>	<b>MOTION REGARDING CUSTODY</b>	<b>(A) CASE NO.</b>
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Court address \_\_\_\_\_ Court telephone no. \_\_\_\_\_

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

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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 custody.
- b. There is currently no order regarding custody.

2. Attached is a completed Uniform Child Custody Jurisdiction Enforcement Act Affidavit (MC 416).

**(D)**  3. The  plaintiff  defendant  third party was ordered to have custody of the following child(ren):

**(E)** 4. The child(ren) have been living with \_\_\_\_\_ at  
Name(s) \_\_\_\_\_ since \_\_\_\_\_  
Complete address \_\_\_\_\_ Date \_\_\_\_\_

**(F)** 5. Proper cause exists or circumstances have changed as follows:  
Use a separate sheet to explain in detail what has happened and attach. Include all necessary facts.

**(G)** 6. It is in the best interests of the child(ren) to establish or change custody for the following reasons:  
Use a separate sheet to explain in detail which best interest factors under the Child Custody Act support this motion and attach. Include all necessary facts.

**(H)**  7. \_\_\_\_\_ and I agree to custody, support, and parenting time as follows:  
Name Use a separate sheet to explain in detail what you have agreed on and attach. Include all necessary facts.

**(I)** 8. I ask the court to order that custody, parenting time, and support be as follows:  
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.

**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 88.

**CERTIFICATE OF MAILING**

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

**(L)** \_\_\_\_\_  
Date Moving party's signature



<b>STATE OF MICHIGAN</b> 46TH OTSEGO	<b>JUDICIAL CIRCUIT</b> <b>COUNTY</b>	<b>VERIFIED STATEMENT</b>	<b>CASE NO. and JUDGE</b>
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**Friend of the court address**  
800 LIVINGSTON BLVD., SUITE 1A; GAYLORD, MI 49735

**Telephone no.**  
(989) 731-7450

<b>Information about you:</b>							
1. Last name                      First name                      Middle name				2. Any other names by which you have been known			
3. Date of birth		4. Social security number			5. Driver's license number and state		
6. Mailing address and residence address (if different)							
7. E-mail address							
8. Eye color	9. Hair color	10. Height	11. Weight	12. Race	13. Gender	14. Scars, tattoos, etc.	
15. Mobile telephone no.		16. Home telephone no.		17. Work telephone no.		18. Occupation	
19. Business/Employer's name and address					20. Gross weekly income		
21. Did you apply for or receive public assistance? If yes, please specify kind and case number. <input type="checkbox"/> Yes <input type="checkbox"/> No							
22. Any other country(ies) of citizenship:		23. Foreign/international identifying number(s) and source(s) (driver's license, passport, social/tax no., etc.)					

<b>Information about the other parent in this case:</b>							
24. Last name                      First name                      Middle name				25. Any other names by which parent is or has been known			
26. Date of birth		27. Social security number			28. Driver's license number and state		
29. Mailing address and residence address (if different)							
30. E-mail address							
31. Eye color	32. Hair color	33. Height	34. Weight	35. Race	36. Gender	37. Scars, tattoos, etc.	
38. Mobile telephone no.		39. Home telephone no.		40. Work telephone no.		41. Occupation	
42. Business/Employer's name and address					43. Gross weekly income		
44. Did this parent apply for or receive public assistance? If yes, please specify kind and case number. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure							
45. Any other country(ies) of citizenship:		46. Foreign/international identifying number(s) and source(s) (driver's license, passport, social/tax no., etc.)					





Information about the minor child(ren):					
47. a. Name and sex of minor child in case	M/F	b. Birth Date	c. Age	d. Soc. Sec. No.	e. Residential Address
48. a. Name and sex of other minor child of either party	M/F	b. Birth Date	c. Age	d. Residential Address	
49. Health care coverage available for each minor child					
a. Name of Minor Child	b. Name of Policy Holder		c. Name of insurance co./HMO	d. Policy/Certificate/Contract/Group no.	
50. Name(s) and address(es) of person(s) other than parties, if any, who may have custody of child(ren) during pendency of this case					

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

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

You are required to notify friend of the court, in writing, if any of your public assistance information above changes before your judgment is entered. If you want child support services, complete form DHS 1201-D, available online at <https://www.courts.michigan.gov/49572a/siteassets/forms/scao-approved/dhs1201d.pdf>. Or you may request copy from your local friend of the court office.