

STATE OF MICHIGAN

15TH JUDICIAL CIRCUIT COURT FOR BRANCH COUNTY

Plaintiff,

v.

Case No. _____

Defendant.

INSTRUCTIONS FOR REQUESTING A SUPPORT REVIEW

To request a support review, you must complete and return this form. If your request is denied, you will be notified by mail. If your request is approved, you will receive notice of this review by mail and each party will be advised of the information that the Friend of the Court needs to complete the review. However, if you request a review, but do not provide the information requested, your review will be dismissed. Be advised if you request a review and there is current public assistance, but fail to provide the information requested, potential income will be used. If you fail to provide **all** of the requested information, the outcome of the investigation may be affected. The effective date of any modification of support initiated via this form is the date the Friend of the Court received this form.

If a recommendation is filed, the parties will have an opportunity to file a timely objection with the Clerk of Circuit Court if they believe that it is unfair or inappropriate.

Should you have questions concerning this review process, please contact the Investigative Secretary at (517) 279-5167. Thank you.

REQUEST FOR REVIEW OF CHILD SUPPORT

Pursuant to Public Law 93-647, as amended, under the Support Enforcement Program of Title IV-D of the Social Security Act, I request the Friend of the Court assistance to investigate and determine whether the current child support order should be modified. I understand that I am entitled to request only one support review every three years from the date of the last support order entered.

I authorize my employer and any other sources of income to release to the Friend of the Court all information regarding my past, present and future income.

Signature

Current Employer (Name and Address)

Print your name

If unemployed, last employer & last date worked

Your Phone Number

Date

Your current address (Street, City, State, Zip Code)

OFFICE USE ONLY

PA _____ D WITH LTR _____ ED SENT FOR: P _____ AND/OR D _____

(MODIFIED 2/27/2019)