

**Mecosta County Friend the Court  
400 Elm Street  
P.O. Box 508  
Big Rapids, MI 49307  
(231) 592-0115**

**MOTION REGARDING SUPPORT – FOC 50**

**USE THIS FORM IF:**

- ◆ You have a pending case for divorce, separate maintenance, paternity, or family support; or
- ◆ You have a judgment of divorce, separate maintenance, or an order of filiation but support was not included; or
- ◆ You already have a support order through this office and you want the court order reviewed/changed.

By using this form, you are **representing yourself** in a court action regarding child support issues. You must follow these instructions carefully and fill out the form completely.

**NOTE:** *Regardless of the amount of support you are requesting, the court is required to use the Michigan Child Support Guidelines in determining the correct amount, unless the court finds that using the Guidelines would be unjust or inappropriate.*

**INSTRUCTIONS:**

- A.** Before you fill in the Case No., get your court papers for divorce, separate maintenance, paternity, or family support and copy the Case No. from those court papers onto this form.
- B.** Also use your court papers to fill in the "Plaintiff" and "Defendant" boxes and if applicable, the "Third Party" box. Copy the names from the court papers onto this form. For example, if your name is in the box that says "plaintiff", then you should write your name in the "plaintiff" box on this motion form.

You are the "moving party". Once you have written the names where they belong, you must check the box "moving party" in the same box as your name.

- C. Check only one box.** If you have a judgment or order for divorce, separate maintenance, paternity, or family support, read it carefully to find out if there is any information in it about support. If there is information about support, check box a. If there is no information about support, check box b.
- D – F.** Check these boxes only if you checked box a. in "C" above. Read your court papers for divorce, separate maintenance, paternity, or family support to find out who was ordered to pay support, child care, and health care; how much; and how often. Write this information here.

- G.** Check this box only if you checked box a. in “**C**” above and conditions have changed that require a change in support. Explain in as much **detail** as possible what has happened. If you need more space, use a separate sheet of paper. Print this information as neatly as you can. (You will need **3 Copies** of this sheet to attach to **3 Copies** of this form).
- H.** Check this box if you and the other party have agreed to start support or make changes in the support. Explain in as much **detail** as possible what you have agreed on. If you need more space, use a separate sheet of paper. Print this information as neatly as you can. (You will need **3 Copies** of this sheet to attach to **3 Copies** of this form)
- I.** You need to explain in as much **detail** as possible what you want the court to order. If you checked “**H**” above, check the box “Same as 6. Above”. Otherwise, write in the details. If you need more space, use a separate sheet of paper. Print this information as neatly as you can. (You will need **3 Copies** of this sheet to attach to **3 Copies** of this form)
- J.** Write in today’s date and sign your name.
- K.** To obtain a hearing date you will first need to go to the County Clerk’s Office and pay the \$20 filing fee and \$40 order entry fee, **total of \$60**. With your receipt and copies of the Motion go to the Friend of the Court Office to get a hearing date, and fill in this information on all copies.
- L.** On the date that you file this Motion, complete the certificate of mailing on all of your copies. File the Original with the County Clerk, a copy goes to the Friend of the Court Office, a copy is mailed to the other party along with the Response Form and Instructions for the Response, and keep a copy for yourself.

**This Motion, including Notice of Hearing, must be served at least 9 days (not including holidays) before the hearing date. They may be served by regular, first class mail.**

You must attend this hearing. Since you are representing yourself, you are expected to follow the same general rules as an attorney would. Check in at the Friend of the Court office on the scheduled date and time, 10 to 15 minutes early. Dress neatly. Be prepared to spend most of the morning or afternoon in court. If you feel you need to subpoena someone to this hearing you will need to follow the procedures in the Michigan Court Rule 2.506 or consult an attorney. **Bring all supporting documents, evidence and witnesses with you.**

It is your responsibility to provide supporting facts for your request. **You will need to submit 5 days prior to the hearing date COPIES of the last 2 years of income tax returns (all pages), W-2 forms, 4 current pay check stubs, copies of any/all medical insurance cards issued for the benefit of your child(ren).**

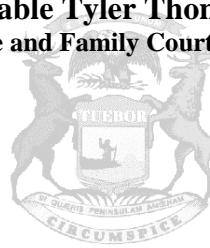
**THE FRIEND OF THE COURT OFFICE WILL NOT REPRESENT YOU OR THE OTHER PARTY.**

After the hearing, the Friend of the Court Referee will make a Recommendation. If no Objection is filed within **21 days** of the proof of mailing, the Recommendation will become an Order of the Court.

# The 18<sup>th</sup> PROBATE COURT & 49<sup>th</sup> CIRCUIT COURT - FAMILY DIVISION

MECOSTA COUNTY  
Mecosta County Courthouse  
400 Elm Street  
Big Rapids, MI 49307  
Phone: (231) 592-0135  
Fax: (231)-592-0191

Honorable Tyler Thompson  
Probate and Family Court Judge



OSCEOLA COUNTY  
Osceola County Courthouse Annex  
410 West Upton  
Reed City, MI 49677  
Phone: (231) 832-6127  
Fax: (231) 832-6181

## POLICY ON DE NOVO JUDICIAL HEARINGS FOLLOWING OBJECTIONS TO FOC REFEREE RECOMMENDATIONS

This policy is adopted by the Family Division of the 49<sup>th</sup> Circuit Court, pursuant to MCL 552.507 and MCR 3.215, to avoid duplicative litigation and conserve resources of litigants and of the Court:

**1. Request for De Novo Hearing:** Following referee hearings in domestic relations matters, a party wishing to object to any recommendation made by the Referee shall, within 21 days after the recommended interim order is served on the parties, file a written objection with the Clerk, obtain a judicial hearing date and serve copies of the written objection and notice of hearing on the opposing party and Friend of the Court. *In order to schedule a hearing, you must contact the judicial scheduling clerk at 231-592-0135 ext. 2.*

- a. **Service:** The objecting party shall serve copies of the written objection and notice of hearing on the opposing party and on the Friend of the Court.
- b. **Contents:** The Objection shall include a clear and concise statement of specific errors of law or clearly erroneous findings of fact made at the Referee hearing. Matters not specifically objected to will not be considered by the Court. Objection forms will be made available at the FOC office.
- c. **Transcripts:** The objecting party shall contact the office of the Friend of the Court to request preparation of a transcript of the referee hearing. The transcript shall be submitted to the court for review prior to the scheduled *de novo* hearing. Unless waived by the court pursuant to paragraph 4, the costs of transcription shall be paid in full by the objecting party before the transcript is prepared. If payment in full is not received at least 2 weeks prior to the scheduled judicial hearing, the objection will be deemed withdrawn and the hearing will be cancelled.
- d. **Pre-Hearing Conference:** Upon request, the Court may schedule a pre-hearing conference, as necessary to advance the purpose of this policy.

**2. Scope and Form of Review:** The Court will consider the case file, the written objections and Referee hearing transcript to determine the scope and form of its *de novo* review. Depending on the circumstances of each case, the court's review and decision may:

- a. Be based entirely upon the record of the referee hearing (including exhibits and any memoranda, recommendations, or proposed orders by the referee); or
- b. Be based in part on the entire record of the Referee hearing, supplemented by relevant new evidence that was not introduced at the referee hearing (see 3, below), or
- c. Be based entirely upon evidence presented at a "live" judicial hearing.

**3. Supplementing the Record:** Requests to supplement the record shall include an affidavit or sworn statement stating the substance of the proposed new evidence and establishing that it was not available at the time of the referee hearing. On a sufficient showing, a "live" judicial hearing may be held to supplement the record with such new evidence. Alternatively, the Court may remand the matter to the Referee to supplement the record.

**4. Transcription Costs. Indigence:** If the objecting party prevails, the cost of the transcript may be apportioned equally between the parties; if the de-novo hearing fails to change the outcome of the Referee hearing, the cost is completely assumed by the party who sought the judicial hearing. On a showing of indigence, the Court may waive the transcription costs incurred or apportioned to any party.

**5. Frivolous Objections:** If the court determines that an objection is frivolous or has been interposed for the purposes of delay, the court may assess reasonable costs and attorney fees. MCR 3.215(F)(3); MCR 2,114(E), (F); MCL 600.2591.

Tyler Thompson  
Presiding Judge  
49<sup>th</sup> Circuit Court, Family Division

## INSTRUCTIONS FOR APPEARING BY VIDEOCONFERENCE OR AUDIO CONFERENCE USING “ZOOM”

### Easy Steps for a “virtual” courtroom proceeding

FOR PEOPLE USING ELECTRONIC DEVICES:



1. Install the **ZOOM** APP
  - For your smartphone or tablet (iPhone, Android): install ZOOM from the Play Store or App Store.
  - For your Computer, laptop, or notebook device with webcam: go to the ZOOM website ([www.zoom.us](http://www.zoom.us)).
2. Create an account using your email address and password.
3. At the time of your virtual hearing / conference call:
  - For a smartphone or tablet, launch the Zoom App and sign into your account.
  - For a computer, laptop, or notebook, go to the website ([www.zoom.us](http://www.zoom.us)) and sign into your account.
4. Then “join” the meeting using Meeting ID number **922 674 4372**
5. Follow the prompts! (They will be different for audio-only versus video + audio).

FOR PEOPLE CALLING IN FROM A LANDLINE PHONE:



You can call the following number and still be in the “Zoom” conference call / virtual hearing at the time of your hearing. Just call 1-646-876-9923 or 1-669-900-6833, then enter Meeting ID # **922 674 4372** followed by the pound sign (#).

### **IMPORTANT** NOTES:

- I. The court cannot provide technical assistance for troubleshooting.  
Download the app well in advance of your hearing.
- II. This is a court proceeding – all court rules apply.
- III. You must be somewhere quiet with a good Wi-Fi or LTE signal.
- IV. Place your mobile device at eye level on a stationary surface.
- V. If your technical issues cause a disruption, your call may be terminated.



STATE OF MICHIGAN  
49TH JUDICIAL CIRCUIT  
MECOSTA COUNTY

## MOTION REGARDING SUPPORT

A

CASE NO.

## Court address

400 ELM ST, BIG RAPIDS, MI 49307

## Court telephone no.

231-592-0115

B

Plaintiff's name, address, and telephone no.

☐ moving party

v

Defendant's name, address, and telephone no.

☐ moving party

Third party name, address, and telephone no.

☐ moving party

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 Referee, David P. Oostdyk  
Judge/Referee

P56621

Bar no.

K

on \_\_\_\_\_ at \_\_\_\_\_ at \_\_\_\_\_ via Zoom - see instructions attached  
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