

**STATE OF MICHIGAN
37TH JUDICIAL CIRCUIT
CALHOUN COUNTY**

**REQUEST TO REOPEN FRIEND OF THE
COURT CASE AND APPLICATION FOR
IV-D SERVICES**

CASE NO.

Friend of the Court Address: 161 E. Michigan Ave, Battle Creek, MI 49014

Court Telephone: (269) 969-6500

Plaintiff's name and address

v Defendant's name and address

Attorney:

Attorney:

1. On _____ an order was entered exempting this case from friend of the court services.
Date

I REQUEST that the friend of the court case be reopened upon filing of this request with the friend of the court office. I request support services under the Support Enforcement Program of Title IV-D of the Social Security Act. If necessary, I request the use of the parent Locator Services. I understand that any information provided to me or on my behalf is to be used only for the purpose of securing child support.

[] I filed a Judgment Information Form with the Friend of the Court on _____
Date

[] Attached to this request is a completed and signed Judgment Information Form.

Date

Signature

CERTIFICATE OF MAILING

I certify that on this date I mailed a copy of this request to the friend of the court and to the other party by first class mail addressed to his/her last known address as defined in MCR 3.203.

Date

Signature