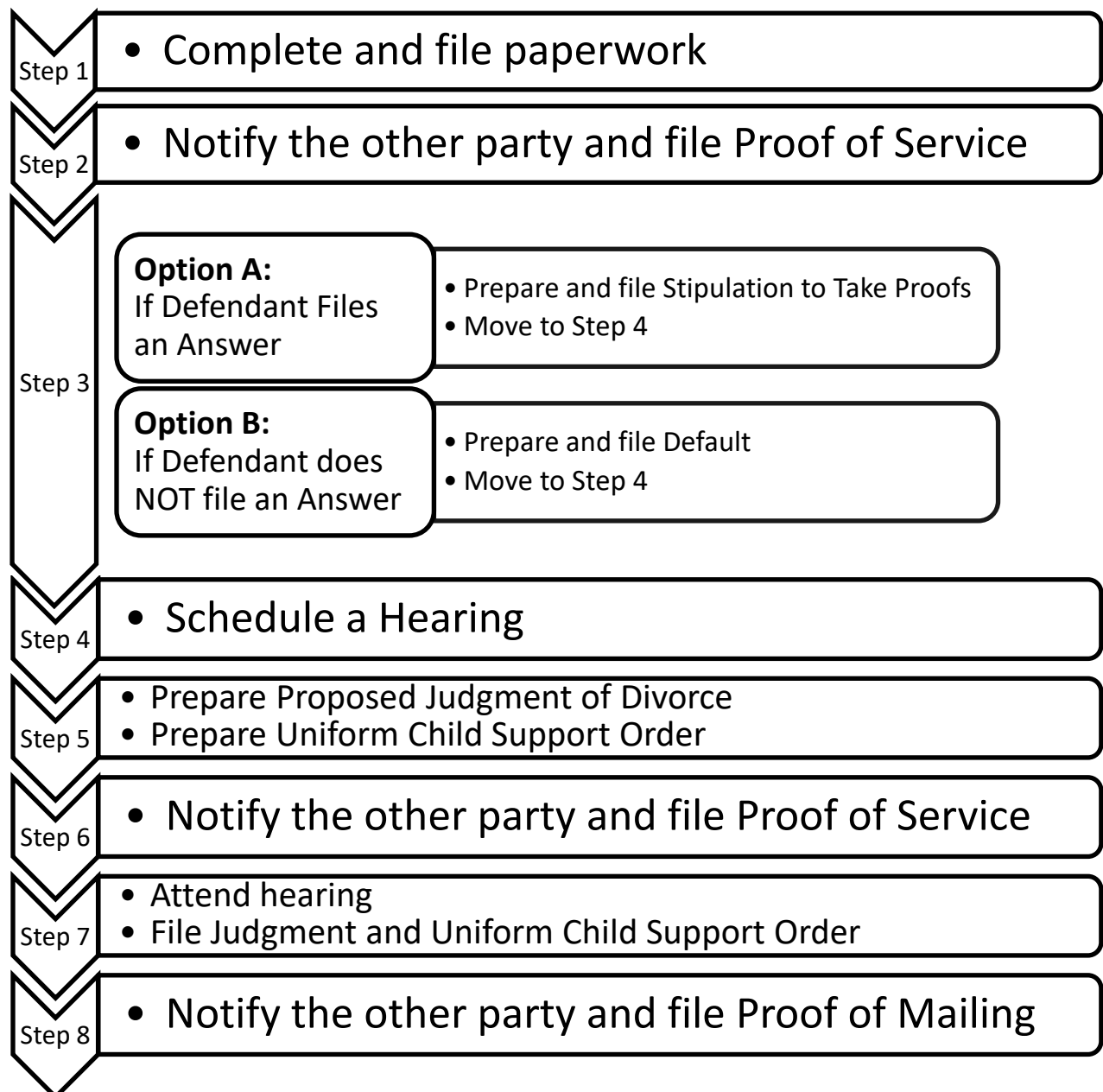




Divorce With Minor Children (DM)

Forms for filing your own **uncontested** divorce in Michigan*



* This is not legal advice. You may want to consult an attorney. This packet is a collaboration among the KPL Law Library, local attorneys, and the courts.

Important Things to Know

Using this Divorce Packet

This packet provides you with the basic forms to file and conclude a simple divorce case. Additional information is available at the Law Library and at MichiganLegalHelp.org. None of these materials can tell you everything you need to know to handle your case or act in your own best interest.

This packet assumes that:

- The parties will use Friend of the Court for child support services. If you are asking for child support but opting out of using Friend of the Court, you need to file a Uniform Child Support Order No Friend of the Court Services (form [FOC 10a](#)) instead of the included form FOC 10. You can ask the Law Library for a copy of this form.
- The parties will follow the Michigan Child Support Formula for calculating child support payments. The court **must** order support according to the Michigan Child Support Formula unless the application of the formula is unjust or inappropriate. See the [Michigan Child Support Formula Manual](#) for a list of deviation factors. If you are not using the Michigan Child Support Formula, then fill out and sign a Uniform Child Support Order Deviation Addendum ([FOC 10d](#)) as well as the Uniform Child Support Order (FOC 10/52). You can ask the Law Library for a copy of this form.
- The plaintiff is not asking for spousal support. If you ask for spousal support, you will need to attach either the Uniform Spousal Support Order (form [FOC 10b](#)) or the Uniform Spousal Support Order No Friend of the Court Services (form [FOC 10c](#)). You can ask the Law Library for a copy of this form.
- The parties are not dividing pension or retirement benefits.
- The parties are not in significant debt or risk of bankruptcy.
- Neither party owns a business.
- Neither party will request temporary orders from the Court.

Help from the Law Library

Our staff are not attorneys. We do not give legal advice. We provide information, forms, and resources. It is important to us that you use the court successfully, but we cannot do things for you. You are responsible for what happens in your case.

Getting Help from a Lawyer

Some issues in a divorce case can be too complicated for someone representing themselves. The Law Library has monthly legal clinics for those who qualify. You can speak to an attorney to help you understand and make decisions about important issues. You should talk with a lawyer if your spouse has a lawyer.

Domestic Violence

If you are a survivor of domestic violence, filing for divorce may put you at additional risk. Many community resources are available to assist you and you may qualify for free legal representation. Ask the staff of the Law Library to connect you to resources to help keep you safe.

CUSTODY

Legal custody means the right and obligation to make important decisions about your children such as where they will go to school, what religion they practice, and non-emergency medical decisions. Physical custody refers to where the children will live most of the time. Both legal and physical custody can be sole (with one parent only) or joint (shared by both parents). The court decides on custody based on the “best interests of the child.”

BEST INTEREST OF THE CHILD(REN)

When you fill out the Complaint, keep in mind that the relevant factors to determine the “best interest” of the child(ren) are set forth in the Child Custody Act of 1970 (MCL 722.23). MichiganLegalHelp.org has an explanation of these factors. You need enough to support your claim, but this will be a public document that will be retained by the Court indefinitely, so keep that in mind when you are describing what your claim is based on, especially regarding sensitive or embarrassing facts related to your children.

PARENTING TIME

When one parent has physical custody, the time the children spend with the other parent is called “parenting time.” When the parents have joint custody, both parents have parenting time. Parenting time is also decided based upon the “best interest” factors. The law presumes that it is in the best interest of the children to be close to and spend time with both parents. A parenting time schedule sets out the days and times for parenting time.

WHAT IS THE KALAMAZOO COUNTY PARENTING TIME POLICY?

Often the Court uses a shorthand expression “Kalamazoo County Parenting Time Policy” to describe a standard type of parenting time schedule. A copy of this policy is included in this packet. Familiarize yourself with this schedule, and you can more accurately describe what schedule you’d like, or express yourself by referring to the Kalamazoo County Parenting Time Policy.

CHILD SUPPORT

Under the law, both parents have an obligation to provide financial support for their children. Which parent will be required to pay child support to the other is based upon each parent’s income, the number of children, and can be affected by how much time each parent spends with the children. Child support generally continues until a child is 18 but may continue to age 19 if the child is still in high school and likely to graduate.

HOW DO I CALCULATE CHILD SUPPORT?

There is an official formula in Michigan. The calculator is located at: pcal.state.mi.us/calculatorapp

This packet contains the following forms:

- Case Initiation Information
- Record of Divorce (DCH-0838)
- Summons and Proof of Service (MC 01)
- Complaint for Divorce With Children
- Verified Statement (FOC 23)
- Application for IV-D Child Support Services (DHS 1201-D)
- Uniform Child Custody Jurisdiction Enforcement Act Affidavit (UCCJEA) (MC 416)
- Fee Waiver Request (MC 20) (if applicable)
- Confidential Case Inventory (if applicable)
- Stipulation to Take Proofs
- Default Request and Entry (MC 07)
- Motion for Entry of Default Judgment and Notice of Hearing
- Judgment of Divorce With Children
 - Income Tax Addendum (if needed)
 - Parenting Time Addendum (if needed)
 - Personal Property and Debt Addendum (if needed)
 - Real Property Addendum (if needed)
 - Vehicle Addendum (if needed)

- Uniform Child Support Order (FOC 10)
- Domestic Relations Judgment Information (FOC 100)
- Testimony in Final Divorce Hearing
- Proof of Mailing (MC 302)

You will not use all the forms included in this packet. The forms you use depend on whether the Defendant files an Answer (Step 3A or Step 3B) and what Addendums you need with your Judgment.

WHAT ARE THE FILING FEES?

- Filing Fee: \$255
- Motion Fee: \$20

Other fees may apply.

I CAN'T AFFORD THE FEES!

Fill out the included Fee Waiver Request form.

WHERE IS THE FAMILY COURT?

1536 Gull Road, Kalamazoo, Michigan 49048. Their phone number is (269) 385-6000.

WHAT DOES "UNCONTESTED" MEAN?

That means you agree on the major issues (for example, custody and property). If you don't, this will be very hard to do on your own.

DO I FILL OUT THE ENTIRE FORM?

Some parts of these forms are filled out by the clerk at the courthouse.

HOW LONG WILL THIS TAKE?

According to Michigan law, at least 180 days. Any divorce case must have at least one hearing.

THESE FORMS ARE CONFUSING!

The *Michigan Divorce Book With Minor Children* by Michael Maran will help you. Also, MichiganLegalHelp.org has excellent free online divorce forms.

WHICH CHILDREN DO I INCLUDE?

If you are unsure about which children to include in your divorce, refer to the *Michigan Divorce Book With Minor Children* by Michael Maran and MichiganLegalHelp.org.

I DON'T KNOW WHERE MY SPOUSE IS.

You can file a motion with the court to serve someone another way, called alternate service. Ask the Law Library for the form (Motion and Verification for Alternate Service, MC 303).

HELP! I NEED LEGAL ADVICE!

Call the KPL Law Library to find out when the next free legal clinic is (for residents of Kalamazoo County): (269) 553-7920. The Law Library can also guide you to other resources.

Instructions – Divorce With Children (DM)

Step 1: Complete and File Paperwork



Check the boxes below as you fill out and sign these forms:

- ☐ Case Initiation Information Form
 - ☐ Record of Divorce (DCH-0838)
 - ☐ Summons (MC 01)
 - ☐ Complaint for Divorce With Children
 - ☐ Verified Statement (FOC 23)
 - ☐ Application for IV-D Child Support Services (DHS 1201-D)
 - ☐ Uniform Child Custody Jurisdiction Enforcement Act Affidavit (UCCJEA) (MC 416)
- (wait to sign this form until you are in front of the court clerk or a notary)**

Additional forms if they apply to your situation:

- ☐ Fee Waiver Request Form (MC 20)
- ☐ Confidential Case Inventory (MC21)



File paperwork:

After you've filled out the forms, make a copy for yourself. Then take or mail the originals of all the forms above to the Family Division, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048..

The clerk will make copies for the other party with the court stamp and seal on them. You will serve the Defendant's copies in Step 2.



Pay the filing fee (or file the Fee Waiver Request Form).

The clerk will assign a case number and judge to your case and will stamp and sign the Summons. They will return copies of all the forms the Court doesn't need.

The following are additional forms if they apply to your situation:

- Fee Waiver Request (MC 20) – use this form if you are asking the court to waive fees
- Confidential Case Inventory (MC 21) – use this form if you have other pending or resolved cases with the defendant

STATE OF MICHIGAN 9TH CIRCUIT COURT KALAMAZOO COUNTY	CASE INITIATION INFORMATION	CASE NO.
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Court Address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 48048

Court Telephone No.
(269) 385-6000

To be completed by the attorney/party initiating the case.
It is required that this form be completed and presented to the Court Clerk when filing the case.

PARTIES INFORMATION	
PLAINTIFF	DEFENDANT
First, Middle and Last Name	First, Middle and Last Name
Address:	Address:
Phone Number ()	Phone Number ()
Date of Birth	Date of Birth
Plaintiff's Attorney Name and Address / Bar #	Defendant's Attorney Name and Address / Bar #
☐ I will be representing myself	☐ I will be representing myself

CHILDREN - List individually. List only the common children of the parties.		
Child's Name	Date of Birth	Address of Child

PENDING OR PREVIOUS COURT ACTIONS	
PARTY/PARTIES:	
JUDGE:	NAME OF COURT:
THIS ACTION IS: ☐ CLOSED ☐ OPEN	NEXT HEARING DATE:
TYPE OF ACTION: ☐ ADOPTION ☐ NAME CHANGE ☐ DELINQUENCY ☐ DIVORCE ☐ CUSTODY ☐ PATERNITY ☐ CHILD PROTECTIVE PROCEEDING ☐ OTHER: _____	

Date: _____

 Signature of Attorney/Party Initiating the Case

 Please print name of person signing this form

**RECORD OF
DIVORCE OR ANNULMENT**
MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
By authority of MCL 333.2813.

Court Case Number

Kalamazoo

State File Number

County

1. Plaintiff's Full Name _____ 2. Plaintiff's Birthdate _____
☐ Male ☐ Female (First, Middle, Last) (Month, Day, Year)

3. Last Name Before First Married (if different) _____

4. Plaintiff's Residence _____
(City, Village, or Township) (County) (State)

5. Plaintiff's Birthplace _____ 6. Number of this Marriage _____
(State or Foreign Country) (First, Second, etc. - Specify)

7. Defendant's Full Name _____ 8. Defendant's Birthdate _____
☐ Male ☐ Female (First, Middle, Last) (Month, Day, Year)

9. Last Name Before First Married (if different) _____

10. Defendant's Residence _____
(City, Village, or Township) (County) (State)

11. Defendant's Birthplace _____ 12. Number of this Marriage _____
(State or Foreign Country) (First, Second, etc. - Specify)

13. Place of this Marriage _____
(City, Village, or Township) (County) (State or Foreign Country)

14. Date of this Marriage _____ 15. Date Couple Last Resided _____
(Month, Day, Year) in Same Household (Month, Day, Year)

16. Number of Minor Children in Household at Separation Date (Filing Date if Not Separated) _____
Check if Not Separated ☐ Check If None ☐
(Number)

STOP!

17. Plaintiff's Attorney In Pro Per _____
(Name - Type or Print) (Bar Number)

18. Attorney's Address N/A _____
(Number and Street) (City) (State) (Zip Code)

19. Judgment of _____ 20. Number of Minor Children Whose _____
(Divorce/Annulment - Specify) Physical Custody was Awarded to: Plaintiff _____ Defendant _____ Joint _____ Other _____
(Number) (Number) (Number) (Number)

☐ No Children ☐ Unknown

21. Judgment Recorded on _____ 22. I certify that this Divorce was granted on _____
(Month, Day, Year) (Month, Day, Year)

23. Certifying Official _____
(Signature) (Title) (Date Signed)

Failure to provide the required information is a misdemeanor punishable by imprisonment
of not more than 1 year or a fine of not more than \$1,000.00 or both.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	SUMMONS	CASE NO.
Court address		Court telephone no.

Plaintiff's name, address, and telephone no.
Plaintiff's attorney, bar no., address, and telephone no.

v

Defendant's name, address, and telephone no.
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Instructions: Check the items below that apply to you and provide any required information. Submit this form to the court clerk along with your complaint and, if necessary, a case inventory addendum (MC 21). The summons section will be completed by the court clerk.

Domestic Relations Case

- ☐ There are no pending or resolved cases within the jurisdiction of the family division of the circuit court involving the family or family members of the person(s) who are the subject of the complaint.
- ☐ There is one or more pending or resolved cases within the jurisdiction of the family division of the circuit court involving the family or family members of the person(s) who are the subject of the complaint. I have separately filed a completed confidential case inventory (MC 21) listing those cases.
- ☐ It is unknown if there are pending or resolved cases within the jurisdiction of the family division of the circuit court involving the family or family members of the person(s) who are the subject of the complaint.

Civil Case

- ☐ This is a business case in which all or part of the action includes a business or commercial dispute under MCL 600.8035.
- ☐ MDHHS and a contracted health plan may have a right to recover expenses in this case. I certify that notice and a copy of the complaint will be provided to MDHHS and (if applicable) the contracted health plan in accordance with MCL 400.106(4).
- ☐ There is no other pending or resolved civil action arising out of the same transaction or occurrence as alleged in the complaint.
- ☐ A civil action between these parties or other parties arising out of the transaction or occurrence alleged in the complaint has

been previously filed in ☐ this court, ☐ _____ Court, where

it was given case number _____ and assigned to Judge _____

The action ☐ remains ☐ is no longer pending.

Summons section completed by court clerk.

SUMMONS

NOTICE TO THE DEFENDANT: In the name of the people of the State of Michigan you are notified:

1. You are being sued.
2. **YOU HAVE 21 DAYS** after receiving this summons and a copy of the complaint to **file a written answer with the court** and serve a copy on the other party **or take other lawful action with the court** (28 days if you were served by mail or you were served outside of Michigan).
3. If you do not answer or take other action within the time allowed, judgment may be entered against you for the relief demanded in the complaint.
4. If you require 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.

Issue date	Expiration date*	Court clerk
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*This summons is invalid unless served on or before its expiration date. This document must be sealed by the seal of the court.

PROOF OF SERVICE

TO PROCESS SERVER: You must serve the summons and complaint and file proof of service with the court clerk before the expiration date on the summons. If you are unable to complete service, you must return this original and all copies to the court clerk.

CERTIFICATE OF SERVICE / NONSERVICE

- ☐ I served ☐ personally ☐ by registered or certified mail, return receipt requested, and delivery restricted to the addressee (copy of return receipt attached) a copy of the summons and the complaint, together with the attachments listed below, on:
- ☐ I have attempted to serve a copy of the summons and complaint, together with the attachments listed below, and have been unable to complete service on:

Name	Date and time of service
Place or address of service	
Attachments (if any)	

- ☐ I am a sheriff, deputy sheriff, bailiff, appointed court officer or attorney for a party.
- ☐ I am a legally competent adult who is not a party or an officer of a corporate party. I declare under the penalties of perjury that this certificate of service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Service fee	Miles traveled	Fee	
\$		\$	
Incorrect address fee	Miles traveled	Fee	TOTAL FEE
\$		\$	\$

Signature _____

Name (type or print) _____

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received service of a copy of the summons and complaint, together with

Attachments (if any) _____ on _____ Date and time _____

Signature _____ on behalf of _____

Name (type or print) _____

STATE OF MICHIGAN 9 TH CIRCUIT COURT KALAMAZOO COUNTY	COMPLAINT FOR DIVORCE WITH CHILDREN	CASE NO.
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Court address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.
(269) 385-6000

Plaintiff (person who starts the case)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

v

Defendant (other party)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

I state:

1. Residence

- ☐ One of us has lived in Michigan for the last 180 days.
☐ One of us has lived in Kalamazoo County for the last 10 days.

2. Marriage and Separation

We were married on (date): _____ in (city/state): _____.
☐ We currently live in the same household; **or** ☐ We stopped living together on (date): _____.

3. Pregnancy

- ☐ Neither of us is pregnant; **or**
☐ I am pregnant; **or**
☐ Defendant is pregnant.

4. Children of the Marriage

We have children together who were born or conceived during this marriage. The full name and age of each child is:

Name of Minor Child (under age 18):	Age:	Born before marriage:
		☐
		☐
		☐
		☐

Name of Adult Child (over age 18 but under 19 ½, attending high school full time, and intending to graduate):	Age:	Born before marriage:
		☐

☐ One or more of the children listed above may have a biological father who is someone other than me or the defendant. I understand that the parties are the child's legal parents unless the court enters an order of non-paternity.

5. Children's Addresses

A Uniform Child Custody Jurisdiction Enforcement Act Affidavit (MC 416) is filed with this complaint.

6. **Property and Debts**

We ☐ have; **or** ☐ do not have property or debts to divide.

7. **Reason for Divorce**

There has been a breakdown of the marriage relationship to the extent that the objects of matrimony have been destroyed and there remains no reasonable likelihood that the marriage can be preserved.

8. Other: _____.

I REQUEST that the Court:

a. Enter a judgment of divorce.

b. Order custody as follows:

Child's Name:	Age	Legal Custody	Physical Custody
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint

c. Order parenting time as follows:

- ☐ Reasonable parenting time on dates and times we agree to; **or**
☐ According to a specific schedule.

d. Order child support as follows:

- ☐ Child support will be calculated according to the Michigan Child Support Formula; **or**
☐ Other: _____

e. ☐ Order a fair division of marital property and debts, if applicable.

f. Order a fair division of the costs related to this case.

g. ☐ Change my last name to _____.

h. Grant any other relief that the Court believes is fair and appropriate.

The statements in this Complaint are true to the best of my knowledge.

Date

Plaintiff Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	VERIFIED STATEMENT	CASE NO. and JUDGE
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Friend of the court address

Telephone no.

Information about you:							
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. ☐ Yes ☐ 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.)				

Information about the other parent in this case:							
24. Last name		First name		Middle name		25. Any other names by which parent 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. ☐ Yes ☐ No ☐ 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 changes before your judgment is entered. If you want child support services, complete form DHS-1201D. DHS-1201D is available online at <https://www.courts.michigan.gov/49752a/siteassets/forms/scao-approved/dhs1201d.pdf>. Or you may request a copy from your local friend of the court office.

APPLICATION FOR IV-D CHILD SUPPORT SERVICES

(For Privately Filed Domestic Relations Cases Only)

State of Michigan
Friend of the Court

FOR OFFICE USE ONLY

App Request
Date

App Returned
Date

IV-D Case
Number

Instructions: This is an application for IV-D child support services, and is intended only for parents filing a domestic relations case (divorce, annulment, separate maintenance, paternity, or custody) on their own or through their own attorney. This form is not intended for people without children or those who are not a party to a domestic relations case. This application is designed to be used with a Verified Statement, Judgment Information Form, or other similar court form.

AUTHORITY: 45 Code of Federal Regulations 302.33. **Completion of this application for IV-D child support services is voluntary.**

Domestic Relations Filing/Docket Number (if available)

Who does the child(ren) live with most of the time? (This information is used for administrative purposes only and has no impact on any pending custody hearings.)

What is your relationship to the child(ren) for whom you are applying for child support services?

☐ Mother ☐ Father

☐ Mother ☐ Father ☐ Both

A. Mother's Information

Mother's Name (First, Middle, Last)

Mother's Social Security Number

Mother's Mailing Address (Street, City, State, Zip Code)

Mother's Telephone Number

B. Father's Information

Father's Name (First, Middle, Last, Suffix)

Father's Social Security Number

Father's Mailing Address (Street, City, State, Zip Code)

Father's Telephone Number

C. Family Violence Disclosure

I believe that disclosure of my address or other identifying information may result in physical or emotional harm to me or the child(ren). If yes, additional information will be requested by Friend of the Court staff.

☐ Yes ☐ No

D. Acknowledgement for Child Support Recipient

If I am sent money in error or overpaid, the Michigan IV-D child support program will take action to correct this error. By checking the "yes" box below, I give the IV-D program permission to pay back the error or overpayment by keeping 25% (or otherwise as directed below) from my future child support payments. If I later change my mind, I must contact the Friend of the Court office. Failure to check "yes" has no effect on my eligibility for IV-D child support services.

☐ Yes (Check one if different than 25%) ☐ 10% ☐ 50%

☐ No, please contact me before you try to recover an amount from my support payments.

E. Acknowledgement for Applicant

I understand that I must provide my Social Security number pursuant to the Social Security Act, 42 USC 66(a)(13), in order for Michigan's child support program to provide services.

I have received or have had an opportunity to review a copy of DHS-Pub-748, *Understanding Child Support: A Handbook for Parents*, at www.michigan.gov/childsupport in the Popular Forms section. I understand that I can also ask for a printed copy from the Friend of the Court.

I request child support services available under Title IV-D of the Social Security Act for the child(ren) listed in my domestic relations court filing (refer to DHS-Pub-748 for a list of available services).

Applicant or Attorney of Record Signature (Signature is required)

Applicant or Attorney of Record Printed Name

Date

If signed by an attorney, (s)he is acting on behalf of

Printed Name (Required)

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs or disability.

Return this completed application to your local Friend of the Court Office.

5. I do not know of any pending proceeding that could affect the current child custody proceeding, including a proceeding for enforcement or a proceeding relating to domestic violence, a protective order, termination of parental rights, or adoption, in this state or any other state, **except:** Specify case name and number, court name and address, and nature of the proceeding.

That proceeding _____ is continuing. _____ has been stayed by the court.
Temporary action by this court is necessary to protect the child(ren) because the child(ren) has/have been subjected to or threatened with mistreatment or abuse or is/are otherwise neglected or dependent. Attach explanation

6. I do not know of any person who is not already a party to this proceeding who has physical custody of, or who claims rights of legal or physical custody of, or parenting time with, the child(ren), **except:** State name(s) and address(es) of each person.

7. The child(ren)'s "home state" is _____. *See definition of "home state" below.

8. I state that a party's or child's health, safety, or liberty would be put at risk by the disclosure of this identifying information.

I have filled this form out completely, and I acknowledge a continuing duty to advise this court of any proceeding in this state or any other state that could affect the current child-custody proceeding.

Signature of affiant _____ Name of affiant (type or print) _____ Address of affiant _____

Subscribed and sworn to before me on _____
Date

Deputy clerk/Notary public signature _____

My commission expires on _____
Name (type or print) _____

Notary public, State of Michigan, County of _____. Acting in the County of _____.
This notarial act was performed using an electronic notarization system or a remote electronic notarization platform.

*"Home state" means the state in which the child(ren) lived with a parent or a person acting as a parent for at least 6 consecutive months immediately before the commencement of a child-custody proceeding. In the case of a child less than 6 months of age, the term means the state in which the child lived from birth with a parent or person acting as a parent. A period of temporary absence of a parent or person acting as a parent is included as part of the period. MCL 722.1102(g).

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	FEE WAIVER REQUEST	CASE NO. and JUDGE
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Court address

Court telephone no.

Plaintiff/Petitioner's name, address, and telephone no.

Defendant/Respondent's name, address, and telephone no.

V

Plaintiff/Petitioner's attorney, bar no., address, and telephone no.

Defendant/Respondent's attorney, bar no., address, and telephone no.

In the matter of _____

Instructions: Complete this form and file it with the court. If this request is filed by a prisoner, a certified statement of the prisoner's trust account showing a current balance and a 12-month history of deposits and withdrawals must accompany this form. After you receive a decision on your request, you must serve your request and the decision on the other party(ies).

I, _____, request a waiver of my filing fees for the following reason: (Check 1, 2, or 3)
 Print or type your name

☐ 1. I receive the following type(s) of public assistance because of indigence:

- ☐ Food Assistance Program through the State of Michigan (also known as FAP or SNAP)
- ☐ Medicaid (including Healthy Michigan, CHIP, and ESO)
- ☐ Family Independence Program through the State of Michigan (also known as FIP or TANF)
- ☐ Women, Infants, and Children benefits (WIC)
- ☐ Supplemental Security Income through the federal government (SSI)
- ☐ Other means-tested public assistance: _____

My public assistance case number(s) (if any) is _____.
 Write "none" if no case number. Do not write your Social Security Number

☐ 2. I am represented by a legal services program or I receive assistance from a law school clinic because of indigence.
 The name of the legal services program or law school clinic is _____

☐ 3. I am unable to pay the fees and I did not check item 1 or 2 above.

My gross household income is \$ _____ every _____.
 Week/Two weeks/Month/Year

The number of people in my household is _____.

My source of income is _____.

List assets and their worth, such as bank accounts. If you need more space, attach a separate sheet.

List obligations and how much you pay, such as rent or other debts. If you need more space, attach a separate sheet.

I declare under the penalties of perjury that this request has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

 Date Signature

CLERK WAIVER

1. Payment of filing fees is waived.

Signature of court clerk and date

ORDER

IT IS ORDERED:

- ☐ 1. Payment of filing fees is waived because:
- ☐ a. Your gross household income is under 125% of the federal poverty guidelines.
 - ☐ b. Your gross household income is above 125% of the federal poverty guidelines, but payment of the fees would constitute a financial hardship for you.
 - ☐ c. Other:

If you become able to pay the fees before this case is resolved, you must notify the court.

- ☐ 2. The fee waiver request is denied because:
- ☐ a. Your gross household income is above 125% of the federal poverty guidelines and payment of the fees would not constitute a financial hardship for you
 - ☐ b. Other:

Judge/Magistrate (when authorized) signature and date

NOTICE

IF YOUR REQUEST WAS DENIED: To continue your case and preserve your filing date, you have 14 days from the issue date below to pay the filing fees or request a review. To request a review, fill out a Request for Review of Denied Fee Waiver (form MC 114) and file it with the court.

Issue date (completed by clerk)

STATE OF MICHIGAN CIRCUIT COURT - FAMILY DIVISION COUNTY	CONFIDENTIAL CASE INVENTORY (DOMESTIC RELATIONS AND JUVENILE CODE)	CASE NUMBER PETITION NUMBER JUDGE
---	---	--

Plaintiff's name	v	Defendant's name
In the matter of _____		

Instructions: List any known pending or resolved family division or tribal court cases involving the person(s) named in the complaint or petition or family members of the person(s) named in the complaint or petition. File the completed form with the complaint or petition, but do not attach or staple together. Complete and file additional sheets if necessary.

Examples of family division cases include personal protection orders, divorce, custody, paternity, child support, juvenile delinquency, and child protective proceedings. See MCL 600.1021 for a complete list.

Note: This form is confidential and not to be served on other parties in this case.

Court information (name, number, and county/state)		
☐ This court ☐ Other court or tribunal:		
Case name	Case/File number	
Assigned judge	Case status ☐ Pending ☐ Resolved	Are support or custody/parenting time orders in effect? ☐ Support ☐ Custody/Parenting Time

Court information (name, number, and county/state)		
☐ This court ☐ Other court or tribunal:		
Case name	Case/File number	
Assigned judge	Case status ☐ Pending ☐ Resolved	Are support or custody/parenting time orders in effect? ☐ Support ☐ Custody/Parenting Time

Court information (name, number, and county/state)		
☐ This court ☐ Other court or tribunal:		
Case name	Case/File number	
Assigned judge	Case status ☐ Pending ☐ Resolved	Are support or custody/parenting time orders in effect? ☐ Support ☐ Custody/Parenting Time

Court information (name, number, and county/state)		
☐ This court ☐ Other court or tribunal:		
Case name	Case/File number	
Assigned judge	Case status ☐ Pending ☐ Resolved	Are support or custody/parenting time orders in effect? ☐ Support ☐ Custody/Parenting Time

Date

Signature

Instructions – Divorce With Children (DM)

Step 2: Notify the Other Party and File Proof of Service



You will need a helper who is over 18 years old to complete this step. Your helper must give (serve) the other party with the paperwork you filled out in Step 1:

- Summons signed by the clerk
- Complaint
- Verified Statement
- Uniform Child Custody Jurisdiction Enforcement Act Affidavit

Serve the other party in one of two ways. Use **EITHER**:

- **Personal Service**

Your helper can deliver the papers in person. If your spouse agrees to accept service of the papers, they can fill out and sign the Acknowledgement of Service on the second page of the Summons. If they don't do this, it's OK. Your helper can fill out and sign the Certificate of Service on the second page of the Summons form.

OR

- **Service by Mail**

You or your helper can go to the Post Office and send the papers by Certified Mail, Restricted Delivery, Return Receipt Requested. The Post Office charges a fee for these services. If you do not use certified **and** restricted mail, someone else may sign for the papers. If someone other than the other party signs, you will need to send the papers again. Complete a green card at the Post Office to request this service. The green card looks like this:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X ☐ Agent ☐ Addressee
1. Article Addressed to:	B. Received by (Printed Name) C. Date of Delivery
	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
SAMPLE	
2. Article Number (Transfer from service label) 9590 9401 0000 5191 0000 12	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)
	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

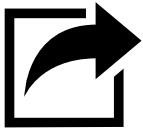
The person who mails the papers must fill out and sign the Certificate of Service on the second page of the Summons form.

You have 91 days from the issue date on the Summons to serve your spouse with the divorce papers, or your case will be dismissed.

Proof of Service

If you used personal service, you should receive the completed Proof of Service (the second page of the Summons form, also known as the Return of Service of the Summons) back from your helper. If the forms were sent by mail, you will get the green card back from the Post Office signed by the Defendant.

For more information on serving divorce papers, read “How to Serve Divorce Papers” at MichiganLegalHelp.org.



File the Proof of Service:

After your spouse has been served with the divorce papers, file one of these with the Family Court:

- If you used **PERSONAL** service, file the Proof of Service on the second page of the Summons form. Make sure either the Certificate of Service is signed by your helper or the Acknowledgement of Service is signed by your spouse.
- If you used **MAIL** service, file the Proof of Service on the second page of the Summons form. Make sure the Certificate of Service is signed by whoever mailed the papers. Make sure the green Return Receipt card your spouse signed is stapled to the second page of the form.

This proves to the Court that you served the defendant with a copy of the paperwork in Step 1.

You can take or mail the proof of service paperwork to the Family Division, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048.

Instructions – Divorce With Children (DM)

Step 3A: If Defendant Files an Answer: Prepare and File Stipulation to Take Proofs

If the other party wants to participate in the divorce case, they may file an Answer. This is a document that responds to each paragraph of your Complaint. If your helper handed the papers to the other party, the Answer must be filed **21** days from the date they served the other party. If your helper mailed the papers, the Answer must be filed within **28** days.



If your spouse does NOT file an Answer, move on to Step 3B.

If the other party **does** file an Answer to the Summons and Complaint, **and you both agree on the major issues in your divorce**, you may file a Stipulation to Take Proofs and ask that the court enter a consent judgment.

You and your spouse may resolve issues by:

- Talking with one another and reaching an agreement, or
- Using a mediator to reach an agreement, or
- Requesting and attending a court settlement conference to reach an agreement

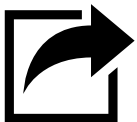
If you and your spouse do not agree on the major issues in your divorce case, you may want to talk with a lawyer.

If you both agree on the issues in your divorce, check the box as you fill out and sign this form:



☐ Stipulation to Take Proofs

The Defendant must also sign this form.



File the original form with the Family Division, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048. You can take this yourself or mail it. The Court will make you and the Defendant a copy after it is stamped by the Court Clerk. Serve the Defendant their copy in Step 6.

STATE OF MICHIGAN 9TH CIRCUIT COURT KALAMAZOO COUNTY	STIPULATION TO TAKE PROOFS	CASE NO.
--	-----------------------------------	-----------------

Court Address
FAMILY DIVISION - 1536 GULL ROAD, KALAMAZOO, MI 49048

Court Telephone No.
(269) 385-6000

Plaintiff's Name, Address and Telephone

v

Defendant's Name, Address and Telephone

NOW COME the parties who agree and stipulate that the plaintiff may present proofs and move for entry of a Judgment of Divorce at the court's convenience, provided that the judgment bears the signatures of both parties.

Dated: _____

 Signature of Plaintiff

Dated: _____

 Signature of Defendant

Instructions – Divorce With Children (DM)

Step 3B: If Defendant Does NOT File an Answer: Prepare and File Default

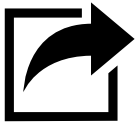
If the other party does not respond (file an Answer) to the Summons and Complaint, you may file a default and request that the court enter a default judgment. If your helper handed the papers to the other party, the Defendant has **21** days from the date they were served to file an Answer. If you or your helper mailed the papers, they have **28** days. If no Answer is filed, you can start this step on the 22nd day (or the 29th day if the service was mailed).

Check the boxes as you fill out and sign these forms:



☐ Default Request and Entry (MC 07). **WAIT to sign this form. The court clerk or a notary must witness your signature.**

☐ Motion for Entry of Default Judgment of Divorce and Notice of Hearing. Fill out and sign the Motion portion only.



File originals of the forms with the Family Division, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048. The Court Clerk will write the hearing date on the form and make copies for you and the Defendant. You will serve one copy on the Defendant in Step 6. The last copy is prepared and filed with the Court after you have served the Defendant in Step 6.



Pay the motion fee (unless you were granted a fee waiver in Step 2).

Sign the first page of the Default Request and Entry form in front of the Clerk or in front of a notary. The Clerk will fill out the Default Entry portion. They will keep an original and give you a signed copy.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	DEFAULT REQUEST AND ENTRY	CASE NO. and JUDGE
--	------------------------------	--------------------

Court address

Court telephone no.

Plaintiff's name, address, and telephone no.
Plaintiff's attorney, bar no., address, and telephone no.

v

Defendant's name, address, and telephone no.
Defendant's attorney, bar no., address, and telephone no.

Party in default: _____

REQUEST

1. I request the clerk to enter the default of the party named above for failure to plead or otherwise defend as provided by law.
2. The defaulted party is not an infant or incompetent person.
3. ☐ It is unknown whether the defaulted party is in the military service. ☐ The defaulted party is not in the military service.
☐ The defaulted party is in the military but there has been notice of pendency of the action and adequate time and opportunity to appear and defend has been provided. Attached, as appropriate, is a waiver of rights and protections provided under the Servicemembers Civil Relief Act. Facts upon which this conclusion is based are: (specify)
4. This request is made on my personal knowledge and, if sworn as a witness, I can testify competently to the facts in this request.

I declare under the penalties of perjury that this request has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Applicant/Attorney signature

Subscribed and sworn to before me on _____
Date

Deputy clerk/Notary public signature

My commission expires on _____
Name (type or print)

Notary public, State of Michigan, County of _____ . ☐ Acting in the County of _____ .

☐ This notarial act was performed using an electronic notarization system or a remote electronic notarization platform.

NOTE: Default can be entered by a district court clerk without the request of a party.

DEFAULT ENTRY

The default of the party named above for failure to plead or otherwise defend is entered.

Court clerk signature and date

Use note: The party who sought the entry of the default is responsible for serving all parties in accordance with MCR 2.603(A)(2).

CERTIFICATE OF MAILING

I served a copy of this default request and entry on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3). I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Signature

STATE OF MICHIGAN 9TH CIRCUIT COURT KALAMAZOO COUNTY	MOTION FOR ENTRY OF DEFAULT JUDGMENT AND NOTICE OF HEARING	CASE NO.
--	---	-----------------

Court address

☐ FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.

(269) 385-6000

Plaintiff's Name, Address & Telephone no. ☐ In Pro Per	v	Defendant's Name, Address & Telephone no. ☐ In Pro Per
Plaintiff's Attorney, Bar No., Address & Telephone No.		Defendant's Attorney, Bar No., Address & Telephone No.

MOTION

1. Plaintiff filed a complaint for divorce on _____.
Date
2. Defendant was served on _____.
Date
3. An affidavit and default were filed on _____.
Date
4. A proposed Default Judgment of Divorce is being served on the Defendant with service of this Motion.
5. Defendant was served at least 14 days before the scheduled hearing with the (1) Default Request and Entry, (2) this motion for entry of default judgment and notice of hearing, and (3) a proposed judgment of divorce.
6. Plaintiff requests the court to enter a default judgment of divorce in this matter under MCR 3.210(B)(4)(a).

Date

Plaintiff Signature

NOTICE OF HEARING

This matter will be scheduled for _____ at _____ before _____ at 1536 Gull Road,
Date Time Judge
Kalamazoo, MI 49048.

CERTIFICATE OF SERVICE

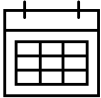
I certify that on this date I served a copy of this Motion on the parties or their attorneys by delivery or first-class mail addressed to their last-known addresses as defined in MCR 2.107(C)(3).

Date

Plaintiff Signature

Instructions – Divorce With Children (DM)

Step 4: Schedule a Hearing



When you file the Stipulation to Take Proofs or the default paperwork, the clerk will schedule a final hearing date. The hearing date must be at least 60 days after the date you filed your initial divorce paperwork. The Clerk will write the hearing information on a **Notice of Hearing** and make copies.

Step 5: Prepare the Proposed Judgment of Divorce and Uniform Child Support Order

In this step, you are creating a proposed Judgment of Divorce to give your spouse notice of what you are asking for in the Judgment. The Friend of the Court must approve your proposed judgment. **Check the boxes as you take these steps:**



☐ Fill out the Judgment of Divorce With Children, including any Addendums you need. **DO NOT check the box next to “Proposed” or “Final” under the title yet!** Watch for other boxes to check and for blank lines or spaces to fill in.

3A→ If you followed Step 3A and filed a Stipulation to Take Proofs:

☐ Mark the box on the Judgment for **CONSENT** judgment.

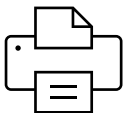
3B→ If you followed Step 3B and filed a Motion for Entry of Default Judgment:

☐ Mark the box on the Judgment for **DEFAULT** judgment.

☐ When you are finished filling out the Judgment, make a copy of the Judgment and Addendums and **check the box next to “Proposed” under the title on the copy**. Set the original Judgment and Addendums aside to file with the Court in Step 7.

☐ **Fill out and sign the Uniform Child Support Order (FOC 10/52).** See Important Things to Know at the beginning of this packet for information about the Michigan Child Support Formula.

☐ **Fill out the Domestic Relations Judgment Information (FOC 100).** Check the box next to “Final.”



Make copies of the forms you filled out:

Form Name	Number of Copies
Proposed Judgment of Divorce With Children and Addendums	2
Domestic Relations Judgment Information (FOC 100)	2
Uniform Child Support Order (FOC 10/52)	3

The originals of these documents are for you.

Send one copy of each document to the **Friend of the Court, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048.**

A copy of each document is served on the Defendant in Step 6.

One copy of the Uniform Child Support Order is for the Court in Step 7.

STATE OF MICHIGAN 9TH CIRCUIT COURT KALAMAZOO COUNTY	JUDGMENT OF DIVORCE WITH CHILDREN ☐ PROPOSED ☐ FINAL	CASE NO.
--	--	-----------------

Court address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.
(269) 385-6000

Plaintiff (person who starts the case)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

Defendant (other party)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

v

The Honorable _____, Judge, 9th Circuit Court

I. Findings of the Court

1. This judgment is entered ☐ after the defendant's default. ☐ on agreement of the parties (consent). ☐ after trial.
2. The plaintiff filed a complaint for divorce against the defendant.
3. **THE COURT FINDS** that there has been a breakdown of the marriage relationship to the extent that the object of matrimony have been destroyed and there remains no reasonable likelihood that the marriage can be preserved.

IT IS ORDERED:

II. Dissolution of Marriage

4. The marriage between the plaintiff and the defendant is dissolved. The parties are divorced.

III. Child Custody, Parenting Time, and Child Support

5. **Custody of the minor child(ren)** is awarded as follows:

Child's Name:	Age	Legal Custody	Physical Custody
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint
		☐ sole to plaintiff ☐ sole to defendant ☐ joint	☐ sole to plaintiff ☐ sole to defendant ☐ joint

6. **Required Notice of Change in Child(ren)'s Address:**
When a parent with physical custody moves and the address of the child(ren) changes, they must promptly complete and file a Change in Personal Information Form (FOC 108) with the Friend of the Court.
7. **Restrictions on Moving the Child(ren) out of Michigan:**
Court approval is required to move the child(ren) out of Michigan.

8. Restrictions on Moving the Child(ren) More Than 100 Miles:

If moving within Michigan:

- ☐ Court approval is required to move the child(ren) more than 100 miles from where they lived when this divorce began (pursuant to MCL 722.31); **or**
- ☐ The parties lived more than 100 miles away from each other when this divorce began (and MCL 7322.31 does not apply); **or**
- ☐ One of the parties has sole legal and sole physical custody according to the Custody section above and the child(ren) can be moved without court approval; **or**
- ☐ The parties agree that the children may be moved without court approval.

9. Parenting Time is as follows:

- ☐ The parties will agree on a reasonable parenting time schedule; **or**
- ☐ Parenting time is ordered according to the attached Kalamazoo County Parenting Time Guidelines which is incorporated into this judgment by reference; **or**
- ☐ The parties will follow a specific parenting time schedule according to the attached Parenting Time Addendum.

10. Parenting Time in a Foreign Country:

- ☐ Neither party will have parenting time in a foreign country or nation that is not a party to the Hague Convention on the Civil Aspects of International Child Abduction; **or**
- ☐ The parties agree that ☐ plaintiff ☐ defendant may exercise parenting time in _____ (name of foreign country or nation), which is not a party to the Hague Convention on the Civil Aspects of International Child Abduction.

11. Parental Cooperation:

The parties will cooperate with each other in carrying out this judgment in each child's best interests. Neither party will do anything to estrange the other from the child or injure the child's opinion of the other party.

12. Child support is awarded according to the attached Uniform Child Support Order (FOC 10/52).**13. Tax Deductions:** Federal and state income tax deductions, credits, and exemptions for the minor child(ren) are awarded according to the attached Income Tax Addendum. If the parent claiming the deductions, credits, and exemptions in a tax year is not the parent with whom the child(ren) lived for the greater number of nights during the year, the other parent will file IRS form 8332 to release their claim to the dependent tax benefits for that tax year.**IV. Property Division****14. Personal Property** (possessions, assets, or business interests):

- ☐ Each party is awarded the personal property now in their possession as their separate property. Each party is fully responsible for paying any debt related to that property. The other party has no claim to that property. No transfer of property between the parties is required; **or**
- ☐ The parties' personal property is awarded according to the attached Personal Property and Debt Addendum. Personal property must be exchanged within 30 days of the entry of this judgment.

15. Debts:

- ☐ The parties have no debts together; **or**
- ☐ Each party is responsible for paying the debts in their own name; **or**
- ☐ Debts are divided according to the attached Personal Property and Debt Addendum.

16. Debt Collection (hold harmless):

- ☐ Does not apply; **or**
- ☐ If one party fails to pay a debt as ordered and the creditor tries to collect the debt from the other party, the party who was ordered to pay the debt must hold the other party harmless from any collection action regarding the debt. This includes reimbursing the other party for any debt they paid and for attorney fees or costs related to defending against the collection action.

17. Vehicles:

- ☐ The parties do not own any vehicles together; **or**
- ☐ Each party will keep the vehicle(s) now in their name and possession. Each party is fully responsible for paying any

debt related to their vehicle(s). The other party has no claim to any vehicle in the other's name and possession; **or**

☐ The parties' vehicle(s) are awarded according to the attached Vehicle Addendum.

18. Real Property (land or home):

☐ The parties do not own any real property together; **or**

☐ The parties' real property is awarded according to the attached Real Property Addendum.

19. Retirement Accounts:

☐ There are no pensions, annuities, or other types of retirement plans or accounts to be divided; **or**

☐ Each party is awarded their own pensions, annuities, or other types of retirement plans or accounts as their separate property.

20. Life Insurance: Except as otherwise preserved in this judgment, any interests of either party in any insurance policy or insurance contract on the life of the other party, as beneficiary or otherwise, are extinguished. Each party holds their policy free and clear of the other party.

21. Health Insurance Availability through COBRA: Either party may obtain coverage for themselves under the other party's present medical or health insurance policy carried through their employment pursuant to the provisions of the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). Each party shall, immediately upon entry of this judgment of divorce, notify their respective plan administrator of this provision, to enable the plan administrator to give proper notice to the other party pursuant to COBRA.

V. Other Provisions

22. Spousal Support:

☐ Neither party is awarded spousal support and parties cannot ask for it in the future (it is forever barred); **or**

☐ Either party may ask for spousal support in the future (it is reserved); **or**

☐ Spousal support is awarded according to the attached Uniform Spousal Support Order (FOC 10b or 10c).

23. Documents: Each party will properly prepare and deliver to the other party all the documents required to divide the property and debt as ordered in this judgment within 30 days of the date of this judgment. A certified copy of this judgment may be recorded with the register of deeds in any county in Michigan where the property is located.

24. Hidden Assets: If either party has hidden any of their assets from the other party, the issue of property division in the divorce may be reopened on the motion of either party. If this motion were to be granted, this court would then resolve the distribution of any previously undisclosed (hidden) assets.

25. Prior Orders: Except as otherwise provided in this judgment, any non-final orders or injunctions entered in this action are terminated.

26. Costs and Fees:

☐ The fees and costs in this case have been paid by the plaintiff; **or**

☐ The fees and costs in this case will be paid by the defendant; **or**

☐ The fees and costs in this case are waived.

27. Name Change:

☐ Neither party asked for a name change; **or**

☐ The plaintiff's name is changed to: _____.

☐ The defendant's name is changed to: _____.

28. Attachments: The following addendums are attached and incorporated into this judgment of divorce.

☐ Personal Property and Debt Addendum ☐ Vehicle Addendum ☐ Real Property Addendum

☐ Income Tax Addendum ☐ Parenting Time Addendum

29. **Other provisions:**

30. **Case Closure:** This judgment resolves the last pending claim and closes this case.
31. **When Judgment Becomes Final:** This judgment is effective immediately after it is signed by the judge and filed with the clerk.
32. **Jurisdiction Retained:** This court retains jurisdiction of this matter to enforce all the terms of this judgment of divorce.
- This judgment is consistent with my decision in this matter.

Date

Judge Bar no.

Date

Friend of the Court

We have read, understand, and agree to the terms of this judgment of divorce:

Plaintiff signature Date

Defendant signature Date

STATE OF MICHIGAN 9TH CIRCUIT COURT KALAMAZOO COUNTY	JUDGMENT OF DIVORCE WITH CHILDREN INCOME TAX ADDENDUM	CASE NO.
--	--	-----------------

Court address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.
(269) 385-6000

Plaintiff (person who starts the case)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

V

Defendant (other party)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

Income tax deductions, credits, and exemptions are divided as follows:

Child's Name	Claimed by	Years	Tax Year to Begin
	☐ plaintiff ☐ defendant	☐ all ☐ alternating	
	☐ plaintiff ☐ defendant	☐ all ☐ alternating	
	☐ plaintiff ☐ defendant	☐ all ☐ alternating	
	☐ plaintiff ☐ defendant	☐ all ☐ alternating	

If alternating years are chosen, the other party is entitled to the same deductions in alternating years.

Tax year refers to the year for which income taxes are filed.

If the parent claiming the deductions, credits, and exemptions in a tax year is not the parent with whom the child(ren) lived for the greater number of nights during the year, the other parent will file IRS form 8332 to release their claim to the dependent tax benefits for that tax year.

STATE OF MICHIGAN 9 TH CIRCUIT COURT KALAMAZOO COUNTY	JUDGMENT OF DIVORCE WITH CHILDREN PERSONAL PROPERTY AND DEBT ADDENDUM	CASE NO.
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Court address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.
(269) 385-6000

Plaintiff (person who starts the case)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

Defendant (other party)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

V

Personal property is awarded as follows:

Type of Property (household, bank account, etc.):	Description:	Value:	Awarded to:
			☐ plaintiff ☐ defendant
			☐ plaintiff ☐ defendant
			☐ plaintiff ☐ defendant
			☐ plaintiff ☐ defendant
			☐ plaintiff ☐ defendant

☐ Other: _____

Debts are divided as follows:

Type of Debt (credit card, loan, etc.):	Creditor/Description: (person or company owed the debt / who owed debt)	Account Number: (last 4 digits only)	Amount Owed:	Debt will be paid by:
				☐ plaintiff ☐ defendant
				☐ plaintiff ☐ defendant
				☐ plaintiff ☐ defendant
				☐ plaintiff ☐ defendant
				☐ plaintiff ☐ defendant

☐ Other: _____

STATE OF MICHIGAN 9TH CIRCUIT COURT KALAMAZOO COUNTY	JUDGMENT OF DIVORCE WITH CHILDREN REAL PROPERTY ADDENDUM	CASE NO.
--	---	-----------------

Court address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.
(269) 385-6000

Plaintiff (person who starts the case)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

Defendant (other party)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

v

Real property is awarded as follows:

Address:	Legal Description of Property: (found on deed or mortgage)	Tax Parcel Number:	Awarded to:	Debt will be paid by:
			☐ plaintiff ☐ defendant	☐ plaintiff ☐ defendant
			☐ plaintiff ☐ defendant	☐ plaintiff ☐ defendant
			☐ plaintiff ☐ defendant	☐ plaintiff ☐ defendant

If one party is awarded a property:

- ☐ The party awarded the property will prepare a quit claim deed. The other party will sign the quit claim deed upon request.
- ☐ The party awarded the property will use their best efforts to refinance the home and remove the other party's name from the mortgage within _____ days. If unsuccessful, then _____.
- ☐ Other: _____.

If both parties are awarded a property:

- ☐ The property will be sold within a reasonable time after the Judgment of Divorce is entered at a price agreed upon by the parties. The parties will share equally in the profit or loss from the sale, and in any related expenses. The parties will hold the property as tenants in common until the sale. Both parties will cooperate regarding the sale and the execution of all necessary documents required.
- ☐ Other: _____.

STATE OF MICHIGAN 9 TH CIRCUIT COURT KALAMAZOO COUNTY	JUDGMENT OF DIVORCE WITH CHILDREN VEHICLE ADDENDUM	CASE NO.
--	--	----------

Court address
FAMILY DIVISION – 1536 GULL ROAD, KALAMAZOO, MI 49048

Court telephone no.
(269) 385-6000

Plaintiff (person who starts the case)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

V

Defendant (other party)

Name:	<i>In Pro Per</i>
Address:	
Phone number:	

Vehicles are awarded as follows, free and clear of any right, title, or interest of the other party:

Make, Model, and Year:	VIN Number:	Awarded to:	Any debt or loan will be paid by:
		☐ plaintiff ☐ defendant	☐ plaintiff ☐ defendant
		☐ plaintiff ☐ defendant	☐ plaintiff ☐ defendant
		☐ plaintiff ☐ defendant	☐ plaintiff ☐ defendant

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	UNIFORM CHILD SUPPORT ORDER ☐ EX PARTE ☐ TEMPORARY ☐ MODIFIED ☐ FINAL	CASE NO. and JUDGE
--	--	---------------------------

Court address	Court telephone no.
----------------------	----------------------------

Plaintiff's name, address, and telephone no. 	v	Defendant's name, address, and telephone no.
Plaintiff's attorney, bar no., address, and telephone no. 		Defendant's attorney, bar no., address, and telephone no.
Plaintiff's source of income name, address, and telephone no. 		Defendant's source of income name, address, and telephone no.

- This order is entered ☐ after hearing. ☐ after statutory review. ☐ on stipulation/consent of the parties.
- ☐ The friend of the court recommends child support be ordered as follows.
- ☐ If you disagree with this recommendation, you must file a written objection with _____ on or before **21 days** from the date this proposed order is mailed. If you do not object, this proposed order will be presented to the court for entry.
- ☐ The calculations pursuant to MCL 552.505(1)(h) and MCL 552.517b are attached.

IT IS ORDERED

1. Deviation from Michigan Child Support Formula.

- ☐ a. The support provisions ordered follow the Michigan Child Support Formula.
- ☐ b. The support provisions ordered do not follow the Michigan Child Support Formula. The attached deviation addendum (FOC 10d) provides the basis for the deviation and the required findings by the court.

2. a. Payer, Support Recipient, and Children Supported Under This Order.

Payer (person who is ordered to pay support):	Support recipient (payee; person, or agency, to whom support is sent):
Children's names	Annual overnights with payer

- b. Effective Date or Condition.** The payer shall pay a **monthly** child support obligation for the children named above, effective _____.
- Date or condition

2. c. **Support Obligation.**

Children supported:	1 child	2 children	3 children	4 children	5 or more children
Base Support: (includes support plus or minus premium adjustment for health-care insurance)					
Support:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Premium adjust.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Subtotal:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Ordinary medical:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Child care:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Benefit credit:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

☐ Support was reduced because payer's income was reduced.

- d. **Ordinary Medical Expenses.** Ordinary medical expenses are the support recipient's co-payments, deductibles, and other uninsured medical-related costs for all children in this case. Annually, the ordinary medical expense amount to be shared between the parties is \$ _____.
The payer's portion of ordinary medical expenses is listed in the above grid.
- e. **Additional Medical Expenses.** Additional medical expenses are the support recipient's out-of-pocket (uninsured) expenses that exceed the children's ordered annual ordinary medical expense amount and any of the support payer's uninsured medical expenses. The annual ordinary medical amount is listed in the paragraph above. Plaintiff will pay _____ % and defendant will pay _____ % of all additional medical expenses. Additional medical expenses for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court.
- f. **Obligation Ends.** Except for child care, or as otherwise ordered, support obligations for each child end on the last day of the month the child turns age 18.
- ☐ g. **Post-majority Support.** The following children will (1) regularly attend high school on a full-time basis after turning 18 years of age, (2) have a reasonable expectation of completing sufficient credits to graduate, and (3) reside full time with the support recipient or at an institution. Therefore, the support obligation for each specific child ends on the last day of the month as follows, except in no case may it extend beyond the time the child reaches 19 years and 6 months of age: (Specify name of child and the date, using the last day of the month, the obligation ends mm/dd/yyyy).

- h. **Child Care.** The parties must notify each other of changes in child care expenses and must additionally notify the friend of the court if the child care expenses end. The child care obligation for each child ends the earlier of the last day of the month that the child is under the age of 13, or if verified, the date when the child care expenses for the child end.
the date provided below, or if verified, the date when the child care expenses for the child end.
When the child care obligation for each child ends, the total child care obligation reduces by that child's pro rata share unless specified differently below. At the court's discretion, the child care obligation may continue beyond that date as a child's health or safety needs require. (Specify name of child; amount for the child, if known; and date the obligation ends (mm/dd/yyyy).)

3. **Health Care Coverage.** For the benefit of the children, the ☐ plaintiff ☐ defendant shall maintain health care coverage (as defined in MCL 552.602) that includes payment for hospital, dental, optical, and other health care expenses when that coverage is accessible to the child and available at a reasonable cost. The reasonable cost is the parent's net cost of adding the children to the parent's coverage
☐ up to a maximum of \$ _____ for plaintiff. ☐ up to a maximum of \$ _____ for defendant.
☐ not to exceed 6% of the plaintiff's/defendant's gross income.
4. **Income Withholding.** Income withholding takes immediate effect. Payments shall be made through the Michigan State Disbursement Unit unless otherwise ordered in item 13.

5. **Qualified Medical Support Order.** This order is a qualified medical support order with immediate effect pursuant to 29 USC 1169. To qualify this order, the friend of the court shall issue a notice to enroll pursuant to MCL 552.626b. A parent may contest the notice by requesting a review or hearing concerning availability of health care at a reasonable cost.
6. **Retroactive Modification, Surcharge for Past-Due Support, and Liens for Unpaid Support.** Except as provided by MCL 552.603, support is a judgment the date it is due and is not modifiable retroactively. A surcharge may be added to past-due support. Unpaid support is a lien by operation of law and the payer's property can be encumbered or seized if an arrearage accrues in an amount greater than the periodic support payments payable for two months under the payer's support order.
7. **Address, Employment Status, Health Insurance.** Both parties shall notify the friend of the court in writing of: a) their mailing and residential addresses and telephone numbers; b) the names, addresses, and telephone numbers of their sources of income; c) their health-maintenance or insurance companies, insurance coverage, persons insured, or contract numbers; d) their occupational or driver's licenses; and e) their social security numbers unless exempt by law pursuant to MCL 552.603. Both parties shall notify the friend of the court in writing within 21 days of any change in this information. Failure to do so may result in a fee being imposed.
8. **Foster-Care Assignment.** When a child is placed in foster care, that child's support is assigned to the Michigan Department of Health and Human Services while under the state's jurisdiction or while in a county-funded program.
9. **Redirection.** As provided by MCL 552.605d and subject to statutory procedures, the friend of the court may redirect support paid for a child to the person who is providing the actual care, support, and maintenance of that child.
10. a. **Abatement (Child Living Full-Time with Payer).** As provided by MCL 552.605d and subject to statutory procedures, the friend of the court shall abate support charges to zero for a child who resides on a full-time basis with the payer of support.
b. **Abatement (Payer Incarcerated).** As provided by MCL 552.605d and subject to statutory procedures, the friend of the court shall abate support charges to zero if the payer of support will be incarcerated for 180 consecutive days or more without the ability to pay.
☐ c. **Abatement (Payer Incapacitated).** When the friend of the court becomes aware that the payer's condition meets the definition of incapacitation as defined in the current or subsequent Michigan Child Support Formula for ☐ 180 days or more, ☐ ____ days or more, monthly support charges shall abate and be temporarily reduced to zero effective the date that the friend of the court office provides notice of the abatement to the parties and to the court. Support charges shall be reinstated effective ☐ 60 days ☐ ____ days after the incapacitation ends. The office shall provide notice of reinstatement to the parties and to the court that specifies the date charges will be effective.

Either party may object to the abatement or reinstatement by filing a written objection with the court within 21 days following when the notice was filed, or by filing a motion. If a timely objection is received, the friend of the court shall either set the objection for hearing or complete a support review with an effective date no earlier than the date of filing of that notice.

Based on a motion by either party or a recommendation following a review by the friend of the court, the amount abated may be later corrected based on the parties' incomes or ability to pay during the abatement period.

11. **Fees.** The payer of support shall pay statutory and service fees as required by law.
12. **Review.** Each party to a support order may submit a written request to have the friend of the court review the order. The friend of the court is not required to act on more than one request received from a party each 36 months. A party may also file a motion to modify this support order.

☐ 13. **Other:** (Attach separate sheets as needed.)

14. **Prior Orders.** This order supersedes all prior child support orders and all continuing provisions are restated in this order. Past-due amounts owed under any prior support order in this case are preserved and paid at the rate calculated using the arrearage guideline in the Michigan Child Support Formula.

Judge signature and date

Plaintiff (if consent/stipulation) _____ Date Defendant (if consent/stipulation) _____ Date

Plaintiff's attorney _____ Date Defendant's attorney _____ Date

Prepared by: _____
Name (type or print)

CERTIFICATE OF MAILING

I served a copy of this uniform child support order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 3.203. ☐ I also served the Deviation Addendum (FOC 10d) with this order. I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	DOMESTIC RELATIONS JUDGMENT INFORMATION ☐ TEMPORARY ☐ FINAL	CASE NO. and JUDGE
--	---	---------------------------

Friend of the court address

Telephone no.

USE NOTE: Complete this form and file it with the friend of the court when the first temporary custody, parenting-time, or support order is entered and when submitting any final proposed judgment awarding custody, parenting time, or support. Mail a copy to each party and file proof of mailing with the court (may use form MC 302, Proof of Mailing).

The information previously provided ☐ is changed. ☐ is unchanged. (Complete only the fields that have changed.)

Date

Signature

Plaintiff Information**Defendant Information**

Name		Name	
Address		Address	
Social security number	Telephone number	Social security number	Telephone number
E-mail address		E-mail address	
Employer name, address, telephone number, and FEIN (if known)		Employer name, address, telephone number, and FEIN (if known)	
Driver's license number and state		Driver's license number and state	
Occupational license number(s), type(s), issuing state(s), and date(s)		Occupational license number(s), type(s), issuing state(s), and date(s)	

CUSTODY PROVISIONS

sole, plaintiff = P sole, defendant = D joint = J other = O _____
 (must identify)

Child's name	Social security number	Date of birth	Physical custody P, D, J, O	Child's primary residence address	Legal custody P, D, J, O

SUPPORT PROVISIONS

☐ Support provisions are stated in the Uniform Support Order.

MEDICAL SUPPORT PROVISIONS: List the name of each insurance provider for the plaintiff and the defendant. Then enter the name of each child in this case who is covered by that provider and the type of coverage provided.

Plaintiff's Insurance Coverage

Provider name and address	Policy/Group no.	Cert. no.	Child(ren)'s name(s)	Medical	Dental	Optical	Other

Defendant's Insurance Coverage

Provider name and address	Policy/Group no.	Cert. no.	Child(ren)'s name(s)	Medical	Dental	Optical	Other

Instructions – Divorce With Children (DM)

Step 6: Notify the Other Party and file Proof of Service



Serve a copy of the following forms from Steps 3 and 5 on the Defendant at least 14 days before the hearing date. You can mail these using First Class mail or serve them in person.

3A→ If you followed **Step 3A** and filed a Stipulation to Take Proofs:

- Stipulation to Take Proofs
- Notice of Hearing that includes the hearing date
- Proposed Judgment of Divorce With Children and Addendums
- Uniform Child Support Order (FOC 10/52)
- Domestic Relations Judgment Information (FOC 100)

3B→ If you followed **Step 3B** and filed a Motion for Entry of Default Judgment:

- Default Request and Entry signed by the clerk (MC 07)
- Motion for Entry of Default Judgment and Notice of Hearing that includes the hearing date
- Proposed Judgment of Divorce With Children and Addendums
- Uniform Child Support Order (FOC 10/52)
- Domestic Relations Judgment Information (FOC 100)

After mailing, prepare Proof of Service. Check the boxes as you complete these steps:

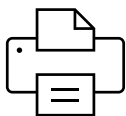


3A→ If you followed **Step 3A** and filed a Stipulation to Take Proofs:

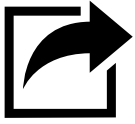
- ☐ **Make a copy of the Proof of Mailing** form at the end of this packet (MC 302). (You will also use this form for Step 8.)
- ☐ **Complete the Proof of Mailing** form (MC 302).

3B→ If you followed **Step 3B** and filed a Motion for Entry of Default Judgment:

- ☐ **Complete the Certificate of Service section** on the Motion for Entry of Default Judgment and Notice of Hearing form.
- ☐ **On the Certificate of Mailing section of the Default Request and Entry**, write in the names of the three documents you sent to the Defendant.



Make copies of the forms you filled out. The copies are for you to keep.



Take or mail the originals of the Proof of Service documents to the Family Division, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048.

Take or mail copies of the following documents to Friend of the Court, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, MI 49048:

- Proposed Judgment of Divorce With Children and Addendums
- Uniform Child Support Order (FOC 10/52)
- Domestic Relations Judgment Information (FOC 100)

These documents must be received by the Friend of the Court at least two weeks before the hearing date for approval. If they are not received in time, they will not be signed by the Judge at the final divorce hearing and your divorce will be delayed.

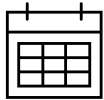
Instructions – Divorce With Children (DM)

Step 7: Attend Hearing and File Judgment and Uniform Child Support Order

Before your hearing, look over and fill out the Testimony in Final Divorce Hearing document in this packet. Take it to the hearing with you. The judge may ask you to read it aloud, or they may ask you more questions.



☐ **Check the box next to “Final” on the Judgment of Divorce With Children.**



Attend the hearing. Bring the original Final Judgment of Divorce With Children and any Addendums and Uniform Child Support Order you prepared in Step 5. If you are approved to appear via Zoom, you must drop off a copy of the Judgment and Addendums before the hearing. If you attend in person, give the Judgment to the Clerk in the hearing for the judge to sign.

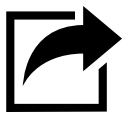
The Clerk will make two copies of the signed and stamped Judgment. One copy is for you to keep. You will send other copy to the Defendant in Step 8.

After the hearing, the Court will send a signed Judgment of Divorce With Children and Addendums and Uniform Child Support Order to Friend of the Court.

Step 8: Notify the Other Party and file Proof of Mailing



Mail the signed Judgment of Divorce With Children and Addendums and Uniform Child Support Order to the defendant. You must do this within seven days.



Fill out the Proof of Mailing form (MC 302) and file it with the Family Division, Gull Road Justice Complex, 1536 Gull Road, Kalamazoo, Michigan 49048. You can drop it off in person or mail it. This proves to the Court that you served the final Judgment and Uniform Child Support Order on the defendant.

Testimony in Final Divorce Hearing Divorce (With Children)

1. My full name is _____ (name).
2. My address is _____ (address), and I am the plaintiff in this case.
3. I married the Defendant on _____ (date) in _____ (location).
4. I filed a complaint for divorce on _____ (filing date).
5. I lived in Michigan for 180 days and in Kalamazoo County for 10 days immediately prior to filing this Complaint.
6. When I filed my complaint for divorce, all the statements were true.
7. All the statements in my complaint for divorce are still true today.
8. There has been a breakdown of the marriage relationship such that the objects of matrimony have been destroyed and there remains no reasonable likelihood that the marriage can be preserved.
9. I do not believe there is any possibility of reconciliation.
10. I am not currently pregnant [OR my spouse is not currently pregnant]
11. There are minor children of this marriage. Their names and ages are: _____.
12. I am asking the court to award custody (state custody arrangement): _____.
13. We have agreed on a parenting time schedule.
14. I am asking the court to award child support (state child support arrangement) _____.
15. I have read all of the terms of the proposed Judgment of Divorce, and I agree with them.
16. I would like the court to change my surname to _____ (name).

I ask that this Court grant an absolute judgment of divorce.

Thank you, Your Honor.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	PROOF OF MAILING	CASE NO. and JUDGE
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Court address

Court telephone no.

Plaintiff's name, address, and telephone no.	v	Defendant's name, address, and telephone no.
Plaintiff's attorney, bar no., address, and telephone no.		Defendant's attorney, bar no., address, and telephone no.
In the matter of _____		

On the date below I sent by first-class mail a copy of _____

to: List names and addresses.

I declare under the penalties of perjury that this proof of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date _____

Signature _____

Name (type or print) _____