

STATE OF MICHIGAN 54 TH JUDICIAL CIRCUIT TUSCOLA COUNTY	REQUEST FOR SUPPORT REVIEW	CASE NUMBER
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Tuscola County Friend of the Court, 440 N State Street, Caro, MI 48723 Phone: (989)673-4848 Fax: (989)673-4898

PLAINTIFF:	DEFENDANT:
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I, _____, am requesting that Friend of the Court review my child support obligation
(print your name)
for an ☐ Increase ☐ decrease because: _____

(You must provide the reason(s) for asking for an increase/decrease. Failure to provide this information may result in your request being denied).

I am requesting that the following cases be reviewed:

Case number: _____

Case number: _____

Case number: _____

YOUR CONTACT INFORMATION:

Address: _____

City: _____ State: _____ Zip code: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Signature: _____ Date: _____

CONFIDENTIAL ADDRESS

If your address is *confidential*, you must complete the section below and provide an *alternative address* where you agree to receive all case related mail and correspondence. The other party *will* be provided with your alternative address for service purposes and correspondence. If you have any other child support cases in Michigan, the alternative address will be used for correspondence and service for those cases as well.

☐ (Please check this box if applicable) I wish to have my new address marked *confidential*. I understand that I must provide the court with an "alternative address" where I agree to have all my case related mail sent to. I also understand that my alternative address may be provided to the other party in this case and/or any other child support case I may have, even if that case is not in Tuscola County.

My alternative address is:

Street Address City State Zip Code