



Cass County Friend of the Court

Law & Courts Building, 60296 M-62, Suite 3
Cassopolis, MI 49031
Phone: (269) 445-4436/Fax: (269) 445-4435
Email: FOC@cassco.org

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WITHDRAWAL OF REQUEST TO ABATE (STOP) CHILD SUPPORT

CASE NO. _____

Plaintiff's name, address, and telephone number	Defendant's name, address, and telephone number
_____	_____
_____	_____
_____	_____
_____	_____

I am the _____ Plaintiff _____ Defendant in this case

I had previously filed a Request to Abate (Stop) Child Support Because of Child(ren) Living with Payer regarding the following Child(ren):

Name of Child	Date of birth
_____	_____
_____	_____
_____	_____

I wish to withdraw my Request to Abate (Stop) Child Support Because of Child(ren) Living with Payer.

Signature of Requesting Party Date