

State of Michigan 43 <sup>rd</sup> Judicial Circuit Cass County	<b>Request by Support Recipient          to set Child Support at Zero</b>	Case No.
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Law & Courts Building, 60296 M-62, Cassopolis, MI 49031

269-445-4436

Plaintiff's name, current address & phone number:

Defendant's name, current address & phone number:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Pursuant to MCL 552.605, I request the Court to enter a zero child support order to deviate from the child support formula because application of the child support formula is unjust or inappropriate in this case:

**Check one box:**

- Child support was previously ordered by the Court per the child support formula and a calculation is on file  
 Child support has not yet been ordered by the Court and a child support formula calculation is attached

The reason why application of the child support formula is unjust or inappropriate in this case is: (Please explain why you feel that a \$0 child support order is appropriate.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**A CHILD SUPPORT PAYMENT OF \$ \_\_\_\_\_ IS SUBMITTED TO THE FOC WITH THIS REQUEST TO SET CHILD SUPPORT AT ZERO (MUST BE AT LEAST \$5) IF NO PAYMENTS HAVE BEEN MADE IN THIS CASE IN THE CURRENT CALENDAR YEAR.**

**I HAVE CHECKED WITH THE FRIEND OF THE COURT AND THERE ARE ARREARS OWED OF \$ \_\_\_\_\_ OWED BY \_\_\_\_\_ (LIST PAYER OF SUPPORT) TO \_\_\_\_\_ (LIST RECIPIENT OF SUPPORT).**

**I UNDERSTAND THAT IF I WANT CHILD SUPPORT REINSTATED, I MUST FILE A REQUEST FOR A CHILD SUPPORT REVIEW OR FILE A MOTION REGARDING SUPPORT.** \_\_\_\_\_  
 (INITIALS)

**I UNDERSTAND THAT IF THE MINOR CHILD(REN) RECEIVE PUBLIC ASSISTANCE, THE FOC MAY RECEIVE A REFERRAL FROM MDHHS REQUESTING THAT A SUPPORT INVESTIGATION OCCUR, AND THAT SUPPORT MAY BE ORDERED AS A RESULT.** \_\_\_\_\_  
 (INITIALS)

I understand that 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 **UNLESS** all arrearages are also wiped out at the time of this Request by the submission of a separate **STIPULATION TO CANCEL SUPPORT ARREARAGE.** \_\_\_\_\_  
 (INITIALS)

Except as ordered herein, all prior orders shall remain in full force and effect. The Recipient of child support affirms that this request serves the best interests of their child(ren).

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Recipient of Child Support

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )

Before me, Notary Public in and for said County and State appeared the Recipient of Child Support, who acknowledge that s/he did sign the foregoing instrument & the same is his/her free act deed.

\_\_\_\_\_  
Notary Public, In and For \_\_\_\_\_ County, State of \_\_\_\_\_ My Commission Expires: \_\_\_\_\_

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*DO NOT COMPLETE FORM BELOW THIS LINE—FOR FOC USE*

I certify that I have reviewed the file in this matter and have approved this Request to Set Child Support at Zero.

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Cass County Friend of the Court representative

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Carol M. Bealor, Director  
Cass County Friend of the Court