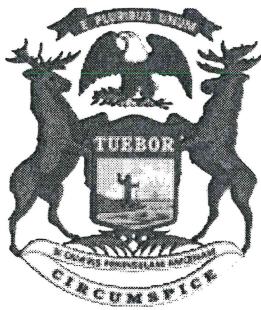


Circuit Judge
Ronald J Schafer
Suzanne Hoseh Kreeger
Montcalm County

THE CIRCUIT COURT
FOR



The Eighth Judicial

Office Of
Monica J Tissue-Daws
Friend of the Court/Referee
PO Box 305
Stanton, Michigan 48888
Phone (989) 831-7332
Fax (989) 831-7376

Circuit of Michigan

MOTION FOR CHANGE OF DOMICILE/LEGAL RESIDENCE

PLEASE NOTE:

By filling out this motion and using the instructions, you are representing yourself in a court action (In Pro Per) regarding changing the domicile/legal residence of the minor child(ren) and stating you do not have legal representation. **If you have retained an attorney (for any reason), you cannot file this motion on your own. You MUST contact your attorney and have him/her do the filing.**

INSTRUCTIONS FOR FILLING OUT THE MOTION:

- A. Using **blue or blank ink only**, fill in the Case Number (located in the upper right corner of your court papers)
- B. Print or type clearly the name/address of both the Plaintiff and Defendant. The Plaintiff will always be the person who filed the original complaint.
- C. 1. List the date of your custody order. 2. Check the appropriate box per your court order.
- D. Explain in detail why it is in the best interests of the minor child(ren) to permit the change in the domicile or legal residence.
- E. Explain in detail what you are asking the Court to order.
- F. Explain in detail if you want the parenting time order to continue or if you are asking for modifications. **BE SURE TO DATE AND SIGN YOUR MOTION.**

FILING A MOTION TO CHANGE DOMICILE/LEGAL RESIDENCE:

1. Unless otherwise indigent, before motions can be filed, the filing fee **MUST be paid in full**. On pre-judgment cases the filing fee is \$20.00 and on post-judgment cases the filing fee is \$100.00. The filing fee **must** be a cashier's check or money order payable to the "County Clerk," not the FOC. We cannot accept personal checks or cash.
2. The original document and filing fee **MUST** be turned in to the FOC office. The FOC will file the motion with the Clerk of the Court and send out notice of hearing to all parties.

NOTE: You **MUST attend the hearing to argue your motion.** If you fail to appear, your motion will most likely be dismissed and you may be assessed court costs and be unable to file another motion to change domicile/legal residence for six (6) months, absent exigent circumstances.

Approved, SCAO

Original - Court
1st copy - Other party
2nd copy - Moving party

3rd copy - Friend of the court
4th copy - Proof of service
5th copy - Proof of service

STATE OF MICHIGAN
8TH JUDICIAL CIRCUIT
MONTGOMERY COUNTY

MOTION REGARDING CHANGE OF
DOMICILE/LEGAL RESIDENCE

CASE NO.

Court address

FRIEND OF THE COURT, 629 N. STATE ST., PO BOX 305, STANTON, MI 48888

Court telephone no.
(989) 831-7332

(B)

Plaintiff's name, address, and telephone no. moving party

Defendant's name, address, and telephone no. moving party

V

Third party name, address, and telephone no. moving party

(C) 1. On _____ a judgment
Date
or order was entered regarding custody.

2. Legal custody is joint.
 sole with the plaintiff. defendant.

(D) 3. It is in the best interests of the child(ren) to permit a change in the legal residence or the domicile of the following child(ren) because: Use a separate sheet to explain in detail why it is in the best interests of the child(ren) and attach. Include all necessary facts.
Name each child for whom you want this change.

(E) 4. I ask the court to enter an order allowing a change of domicile or legal residence.
Use a separate sheet to explain in detail what you want the court to order and attach.

(F) 5. I ask the court to enter an order continuing the current parenting-time order. modifying the parenting-time order as follows: Use a separate sheet to explain in detail what you want the court to order and attach.

Date

Moving party's signature

NOTICE OF HEARING

A hearing will be held on this motion before

MONICA J. TISSUE-DAWS, REFEREE

P54434

Judge/Referee

Bar no.

(G) on _____ at _____ at FRIEND OF THE COURT, 629 N. STATE ST., STANTON, MI
Date Time Location

If you require special 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. When contacting the court, provide your case number(s).

Note: If you are the person receiving this motion, you may file a response. Contact the friend of the court office and request form FOC 116.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this motion and notice of hearing on the parties or their attorney by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

(H)
Date

Friend of the Court Representative