

<b>STATE OF MICHIGAN 8<sup>TH</sup> JUDICIAL CIRCUIT COURT MONTCALM COUNTY</b>	<b>WITHDRAWAL OF MOTION</b>	<b>FILE NO.</b>
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FRIEND OF THE COURT, 629 N. STATE ST., PO BOX 305, STANTON, MI 48888 PH (989) 831-7332 FX (989) 831-7376

Plaintiff name and address	Defendant name and address
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On \_\_\_\_\_, I signed a motion to modify \_\_\_\_\_  
and filed it with the Friend of the Court Office. I hereby request that said motion be withdrawn and the  
hearing scheduled for \_\_\_\_\_ regarding this matter be canceled.

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Date

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Signature

DO NOT WRITE BELOW THIS LINE (FOR FOC ONLY)

**NOTICE OF CANCELLATION OF HEARING**

The hearing scheduled for \_\_\_\_\_ on the motion filed in this matter is  
canceled.

**CERTIFICATE OF MAILING**

I hereby certify that on this date I mailed a copy of this notice to the parties listed above to their last  
known addresses by ordinary mail.

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Date

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Friend of the Court Representative