

STATE OF MICHIGAN 30TH JUDICIAL CIRCUIT INGHAM COUNTY	OBJECTION TO INVESTIGATION/POST- CONCILIATION ORDER (Post-Judgment/Financial)	CASE NO: JUDGE:
Plaintiff's name, address and telephone no. Attorney:	vs	Defendant's name, address and telephone no. Attorney:

TWO COPIES OF THIS OBJECTION MUST BE FILED WITH THE CLERK OF THE COURT LOCATED AT VETERANS MEMORIAL COURTHOUSE, PO Box 40771, 313 W. KALAMAZOO, LANSING, MI 48901-7971.

1. I, _____, object to the recommended Order dated _____;

- Regarding:
- Financial Review - Child Support
 - Post- Judgment Conciliation - Custody/Parenting Time
 - Uninsured Medical Expenses

2. The specific **factual or procedural reason(s)** for the objection is/are:

(Dissatisfaction with the outcome of the recommendation is not a reason to object. You must be specific in your objections.)

(Use separate sheet if enough room is not provided)

3. I would like the Court Order to provide:

Date: _____

Signature of party, Plaintiff /Defendant

Objections can only be filed by a party to the action and should specifically identify the problems that you have with the Order.

Notice of hearing will be sent to the parties or their counsel either by the Friend of the Court or the attorney for the party who is filing this objection.

CERTIFICATE OF MAILING

I certify that on this date I mailed a copy of this Objection to the parties by ordinary mail addressed to their last known addresses.

Date: _____

Signature