

COURT ADDRESS: FRIEND OF THE COURT, 110 E Washington Street \* Ionia Michigan 48846 FAX: 616/527-5397 TELEPHONE NO. 616-527-5310

PLAINTIFF'S NAME, ADDRESS, HOME & WORK TELEPHONE NO.

v

DEFENDANT'S NAME, ADDRESS, HOME & WORK TELEPHONE NO.

**OBJECTION**

\_\_\_\_\_, STATE:  
NAME OF PARTY FILING OBJECTION

1. I have been served with a conciliation (Interim order) order and/or other Recommendation and/or Order on parenting time, child support, or other issue signed by \_\_\_\_\_ dated \_\_\_\_\_.  
Name of Friend of the Court Employee

2. I object for the following reason(s) - please clearly list reason(s) - use back if necessary:

I request a hearing be held on my objection. I declare that the statements above are true to the best of my information, knowledge, and belief.

Date

Signature of party filing objection

You and the other party will be sent a notice of hearing by mail on this matter

Friend of the Court Use

**NOTICE OF HEARING**

A hearing will be held on this objection before Jessica K. Wierckz, Circuit Court Referee, Courtroom B, Friend of the Court building, 110 E. Washington, Ionia, Michigan on \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m.  
Date Time

**CERTIFICATE OF MAILING**

I certify that on this date I mailed a copy of this objection and notice of hearing to the parties listed above and/or their attorney, if any, at the address stated above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature