SAGINAW COUNTY FRIEND OF THE COURT CONSENT ORDER REQUEST FORM

The Friend of the Court prepares orders for parties who have reached an agreement. Parties who have reached an agreement should fill out this form and return it to: Saginaw County Friend of the Court 111 S. Michigan Ave., Saginaw, MI 48602 or by email foc@saginawcounty.com. foc@saginawcounty.com. <a href="mailto:Please provide copies of your driver's licenses along with the signed agreement. The Friend of the Court Staff Attorney may need to contact you to clarify portions of your agreement before preparing an order. Please provide updated contact information.

Plaintiff's Name Defendant's Name Address: Address: Address: Address:	Case Name	v	Case #	
Daytime Phone	Plaintiff's Name		Defendant's Name	
Email: Email: Email: Email: The Consent Order you are requesting to have entered is for a change in (circle all that apply): 1. Custody 2. Parenting Time 3. Child Support 4. Domicile Set forth the changes you want to make on the following lines (use another sheet if necessary). Please be specific regarding when parenting time will be exercised and include all holidays/extended breaks. If your agreement includes a change in parenting time or child support, please provide the following (NOTE: you cannot set child support at zero unless you are eligible to opt out of the Friend of the Court or you met other zero support criteria (contact your support specialist). Opt out requests should be sent in a separate correspondence to the Friend of the Court.) Plaintiff's Employer: Defendant's Employer: Average Weekly Hours: Average Weekly Hours: Hourly wage: \$ Gross Annual Income: \$ Annual Child Care Costs: \$ Annual Child Care Costs: \$ Medical Insurance Premium Attributable to the Children \$ Medical Insurance Premium Attributable to	Address:		Address:	
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Plaintiff's Signature Date Defendant's Signature Date	Plaintiff's Signature		Defendant's Signature	