

STATE OF MICHIGAN

13TH JUDICIAL CIRCUIT

COUNTY

**OBJECTION TO EX PARTE ORDER AND
MOTION TO RESCIND OR MODIFY**

CASE NO.

A

Court address

280 Washington Street, Traverse City, MI 49684

203 Cayuga, Bellaire, MI 49615

8527 E. Government Center Dr., Suttons Bay, MI 49682-9718

Court telephone no.

231-922-4679

231-533-6353

231-256-9824

B

Plaintiff name, address, telephone no	<input type="checkbox"/> Moving Party

Defendant name, address telephone no	<input type="checkbox"/> Moving Party

v

OBJECTION AND MOTION

C I, _____, state:

Name of party filing motion

D 1. I have been served with an Ex Parte Order signed on _____ and mailed to me on _____.

Date

Date

E 2. I object to the custody parenting time support terms of that order.

Refer to the Instruction Sheet . Explain in detail the reasons for your objection. Specify exactly what you are requesting the Court to order. Use separate sheets of paper as needed and attach to Motion.

3. I request that a hearing be held to rescind or modify the Ex Parte Order.

F I declare that the statements above are true to the best of my information, knowledge, and belief.

Date

Signature of party filing motion

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 a person receiving this Objection/Motion, you may file a response. You must file your response with the Court and serve a copy on the other party no later than 5 days before the hearing.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this Motion/Objection on the other party(ies) by first-class mail at the above addresses.

Date

Signature

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