STATE OF MICHIGAN 48th JUDICIAL CIRCUIT ALLEGAN COUNTY

REQUEST FOR CHILD SUPPORT REVIEW

CASE NO. HON.

ALL	LGAN COUNTY		
	Modification Unit Box 358, Allegan, MI 49010	Telephone No. (877) 543-2660 Fax No. (269) 673-0322	
	My Name:		
My Social Security #:			
My Current Address:			
My Pho	one Number:		
My Email Address:			
Other Pa	arty's Name:		
passed since the la	wides that either party may request a review, in writing, every 36 months. Also, a party ast review, when that party presents evidence of a substantial change in circumstance L 552.517(1)(b) and/or MCL 552.517b(9).		
	Choose Either Option 1 or Option	2	
1. It 1	has been more than three years (36 months) since my last revie	W.	
OR:			
	2. It has been less than three years (36 months) since my last review, but circumstances have substantially changed as follows:		
	I have had a significant change in my income. (Please provid	e last 3 paystubs.)	
	There has been a substantial change in custody and/or parenti explain in detail what has changed since the last support order	•	
	I have (an) additional biological/adopted child/ren. (Please provide a copy of a birth certificate, or Affidavit of Parentage, or an order of Adoption)		
	I have had a substantial change in the cost of health insurance paystubs and a cost of benefit sheet from your employer.)	e. (Provide last 3	
	Other:		
Please review and confirm			
	nd that if I do not complete the required forms and provide evideninate my request for a support review.	dence of income, the friend of the	
	nd that I must present evidence of any substantial change of cirthe court may terminate my request for a support review.	reumstances, and if I fail to do so,	
change from,	and that a support review can result in a recommendation for an the current support order obligation. ached evidence of my change in circumstances with this reques		
Signature of I	Requesting Party	Date	