

STATE OF MICHIGAN 30TH JUDICIAL CIRCUIT INGHAM COUNTY	<b>OBJECTION TO CONCILIATION ORDER (Pre-Judgment)</b>	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 Conciliation Order dated \_\_\_\_\_ as to:
- Support                       Custody                       Parenting Time
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 Conciliation 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