

STATE OF MICHIGAN
44TH JUDICIAL CIRCUIT
LIVINGSTON COUNTY

PRAECIPE FOR FOC REFEREE
GENERAL

CASE NO.

Court Address: 204 S. Highlander Way, Howell, MI 48843

RECEIPT# _____ \$
Clerk's Office: (517) 546-9816

For post judgment motions that affect support, custody, or parenting time, the following filing fees apply;

\$60.00 Filing Fee (\$ 20.00 motion fee –plus- \$ 40.00 FOC fee for post judgment support issues, only -OR-

\$100.00 Filing Fee (\$ 20.00 motion fee –plus- \$ 80.00 FOC fee for post judgment support, custody or parenting time issues)

\$ 20.00 Motion Fee, only for pre-judgment motions, and/or, motions that do not include support, custody, or parenting time issues

Plaintiff's name and address Telephone #	Attorney's name and address Telephone #
Defendant's name and address Telephone #	Attorney's name and address Telephone #

*** hearing date & time must be scheduled through the Clerk's Office (517)546-9816**

JUDGE DAVID J. READER: TUESDAYS FOC REFEREE SCREENING

Even numbered cases before Referee Marran ___ 8:30 ___ 10:30

Odd numbered cases before Referee Huntley ___ 1:30 ___ 3:00

JUDGE HACKETT GARAGIOLA: WEDNESDAYS FOC REFEREE SCREENING

Even numbered cases before Referee Oemke ___ 8:30 ___ 10:30

Odd numbered cases before Referee Eidt ___ 1:30 ___ 3:00

A motion screening will be held at FOC Offices, 210 S. Highlander Way, Howell, MI

on: _____ **at** _____
Date Time

Motion Title: _____

Moving Party: _____ Plaintiff Defendant Attorney
Name

[Time does not allow for witnesses]

ADJOURNMENT POLICY: Adjournments require referee approval through a stipulation and order, or by motion and notice of hearing. Stipulation & Order for Adjournments may be faxed to FOC @ (517)552-2312; Attention FOC Secretary

If you require special accommodations to use the court because of a disability, please contact the court immediately to make arrangements. Please provide your case number when contacting the court.

CERTIFICATE OF MAILING

I certify a copy of this praecipe was mailed by ordinary mail to the opposing party/s at their above stated address.

Date of mailing: _____ Signature: _____