

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	REQUEST TO ACCESS FRIEND OF THE COURT RECORDS AND DECISION	CASE NO.
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Friend of the court address and telephone no. _____

Plaintiff name _____

v

Defendant name _____

Name and mailing address of person requesting access to records _____

Telephone number(s) where you can be contacted during the friend of the court's normal business hours.

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() _____

() _____

Fax _____

1. I certify that I am _____, an individual entitled to access records. (See instructions on other side.)
(Specify)

2. I am interested in the following records: (Describe briefly.) _____

- 3. a. I would like to personally inspect the requested records.
- b. I would like copies of the requested records upon receipt by the friend of the court of the copying fee.
- c. I would like to have the friend of the court or designated employee describe or read the requested information to me by telephone or in person.

Date

Signature

DECISION ON REQUEST

- Request granted in full.
- Request granted in part.
- Request denied.

Reason for partial request or denial. Some of the information was confidential because of court rule, law, or court order.

Other: _____

Requested access will be provided as follows: _____
Date Time Details

Send \$_____ for copying costs to _____. Make check or money order payable to _____.

Date

Signature

Any person denied access to friend of the court records or confidential information may file a motion for an order of access with the judge assigned to the case or with the chief judge if there is no assigned judge. Contact the friend of the court for further information.