

<b>STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY</b>	<b>UNIFORM SPOUSAL SUPPORT ORDER (PAGE 1)</b> <input type="checkbox"/> EX PARTE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> MODIFICATION <input type="checkbox"/> FINAL	<b>CASE NO.</b>
--	--	-----------------

Court address Court telephone no.

Plaintiff's name, address, and telephone no.
Plaintiff's attorney name, bar no., address, and telephone no.
Plaintiff's source of income name, address, and telephone no.

v

Defendant's name, address, and telephone no.
Defendant's attorney name, bar no., address, and telephone no.
Defendant's source of income name, address, and telephone no.

This order is entered  after hearing.  on stipulation/consent of the parties.

**IT IS ORDERED, UNLESS OTHERWISE ORDERED IN ITEM 10:**  Standard provisions have been modified (see item 10).

1. **Spousal Support.** Spousal support shall be paid monthly through the Michigan State Disbursement Unit as follows:

Payer:	Payee:	Amount: \$	Effective date:
--------	--------	---------------	-----------------

2. Income withholding takes immediate effect for those items payable through the Michigan State Disbursement Unit.

3. This order continues until the death of the payee or until the earliest of the following events:

- Date: \_\_\_\_\_  \$\_\_\_\_\_ is paid.
- Remarriage of the payee.  Death of the payer.
- Other (specify all other events): \_\_\_\_\_

4. For tax purposes, the payments will be deductible to the payer and included in the income of the payee.

5. Payments that must be paid directly to the third party (not to the payee) are listed below. (Payments to be made directly to a third party are not payable through the Michigan State Disbursement Unit or friend of the court.)

Type	Amount Per Month	Start Date	Pay to	End Date
	\$			
	\$			
	\$			
	\$			

(See page 2 for the remainder of the order.)

