

STATE OF MICHIGAN 27TH JUDICIAL CIRCUIT OCEANA COUNTY	PARENTING TIME ABATEMENT	CASE NO.
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Court address: 100 State St, Hart, MI 49420 231-873-4605 Fax 231-873-0252

Plaintiff Name and address	Defendant Name and address

Parenting Time Credit: To be eligible for a credit all of the following must be met.

1. The child(ren) must be with the non-custodial parent for six (6) consecutive overnights or more, unless otherwise stated in an Order.
2. Child Support Credit Applications must be submitted within 30 days from the end of the parenting time period.

All credit will be given as directed by the last Court Order addressing abatements.

Child(ren) name(s) \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

For a total of \_\_\_\_\_ consecutive overnights.

**I UNDERSTAND THAT ANY FALSE INFORMATION SUBMITTED MAY RESULT IN DENIAL OF AUTOMATIC PROCESSING OF THIS AND ANY FUTURE CREDITS AND/OR A SHOW CAUSE HEARING BEFORE THE COURT.**

I declare that the information above is true to the best of my information, knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of non-custodial parent

The enclosed parenting Time Abatement has been processed to the above child support account based on the information submitted by the non-custodial parent. Custodial parents that do not agree with the dates submitted must address the issue in writing to the Friend of the Court office. This may result in a hearing before the court.

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**FRIEND OF THE COURT USE ONLY**

Date application received: \_\_\_\_\_ Total overnights: \_\_\_\_\_

Total Credit: \_\_\_\_\_ Credit to account: \_\_\_\_\_ Return to payor: \_\_\_\_\_

Completed by: \_\_\_\_\_ Date copies mailed to parties: \_\_\_\_\_