KALAMZOO COUNTY FRIEND OF THE COURT OFFICE SPECIAL INSTRUCTION PAYMENT

[NOTE: This is an official form. This form can only be completed by Kalamazoo County Friend of the Court staff.]	[NOTE: This Friend of the
DOCKET ORDER #:	DOCKET (
PAYOR NAME:	PAYOR NA
TODAY'S DATE:	TODAY'S
Total Payment Amt: \$	Total Paym
The support payer in this case was instructed to make this special payment directly to the Kalamazoo County Friend of the Court Office as a result of: Felony Non-Support Order to Show Cause Hearing Bench Warrant Hearing and/or Arrest Other	The support directly to to the control of the contr
Following is a breakdown of the distribution amounts for this payment:	Following i
\$ Bench Warrant/Court Costs \$ Child Support \$ Child Care \$ Spousal Support \$ State of Michigan \$ MD/CM - Medical \$ MS - Medical \$ MS - Medical \$ Service Fees \$ Arrears \$ Other (if amounts filled in by FOC employee initial here) PAY IN CASH AT ERIEND OF THE COURT CASHIER WINDOW OR	\$ \$ \$ \$ \$ \$ (if amounts
PAY IN CASH AT FRIEND OF THE COURT CASHIER WINDOW, OR MAKE CASHIER'S CHECK PAYABLE TO: Kalamazoo Co. Friend of the Court 1536 Gull Road Kalamazoo MI 49048	PAY IN CA MAKE CA

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DOCKET ORDER #:	
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TODAY'S DATE:	
Total Payment Amt:	\$
directly to the Kalamazoo ☐ Felony Non-Su ☐ Order to Show ☐ Bench Warrant	case was instructed to make this special payment of County Friend of the Court Office as a result of: apport Cause Hearing t Hearing and/or Arrest
Following is a breakdown	n of the distribution amounts for this payment:
\$	Bench Warrant/Court Costs
\$	
\$	Child Care
\$	Spousal Support
\$	State of Michigan
\$	MD/CM – Medical
\$	MS - Medical
\$	Service Fees
\$	Arrears
\$	Other
(if amounts filled in by F	OC employee initial here)

PAY IN CASH AT FRIEND OF THE COURT CASHIER WINDOW, OR MAKE CASHIER'S CHECK PAYABLE TO:

Kalamazoo Co. Friend of the Court 1536 Gull Road Kalamazoo MI 49048

Signature of FOC Employee Authorizing Form