How to Submit a Change in Personal Information to the FOC

To submit a Change in Personal Information to the FOC, please fill out the attached form.

Submit Online

Computer/Laptop

- 1. Fill out the form below in a pdf viewer, such as Adobe Reader (available for free here)
- 2. After you have filled out the form and signed it with your electronic signature, save the form and then go to the <u>FOC Form Submissions Page</u>.
- 3. Fill in your name, email address, phone number, and case number on the Form Submission page. Attach your completed form at the bottom of the page by clicking the "Choose File" button. NOTE: There is a file size limit of 2MB, and only PDF, JPG, and PNG files are accepted.
- 4. Please also upload proof of identification (copy of your driver's license or state ID). We cannot process your request without proof of identification.

Smart Phone

- 1. Install the Adobe Acrobat Reader App on your phone, for free.
- 2. Open the form, using the Adobe Acrobat Reader App. You can then fill in, sign and save the form on your phone.
- 3. After you have completed the form, save and then go to the FOC Form Submissions Page.
- 4. Fill in your name, email address, phone number, and case number on the form submission page. Attach your completed form at the bottom of the page. NOTE: There is a file size limit of 2MB, and only PDF, JPG, and PNG files are accepted.
- 5. Please also upload proof of identification (copy of your driver's license or state ID) before sending. We cannot process your request without proof of identification.

Submit by Mail

You can fill out the form, print it, sign it and mail it to our office:

Kent County Friend of the Court 82 Ionia NW, STE 200 Grand Rapids, MI 49503

Proof of Identification. Please note that we need Proof of Identification to process your request. You can mail a copy of your driver's license or state ID to the address above or to our email address: FOC.Mail@kentcountymi.gov.

Submit Through MiChildSupport

You can also submit this form through your MiChildSupport case using the 2-way communicator. Visit: www.michigan.gov/michildsupport. As your identification is verified through your MiChildSupport case, proof of identification is not required.

Submit Through Drop Box at 82 Ionia (1st floor just past security checkpoint)

You can fill out the form, print it, sign it and drop it off in the drop box on the **first floor of 82 Ionia Ave NW, Grand Rapids, 49503**. *Include proof of identification*.

Original - Friend of the court Approved, SCAO Copy - Filing party

STATE OF MICHIGAN

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JUDICIAL CIRCUIT **CHANGE IN PERSONAL INFORMATION** COUNTY Telephone no. Friend of the court address Please type or print information. Complete only those sections that apply. You can only file changes for yourself or those minor children of whom you have physical custody. Use another form when making changes for more than one person. You must sign this form and send it to the friend of the court. for party and minor child(ren) for party only 1. New Address and/or Telephone Number for minor child no longer living with custodial parent Name Street address Citv State Zip Area code and telephone number I understand that by filing this change of address, it will be used to automatically update address information on any other childsupport cases I have in Michigan. This change is effective for (check all that apply) all addresses you have listed for me. residence address only (where I live). an address that is confidential by court order and which remains confidential with this change. \square the single mailing address to which all notices and papers will be served. 2. Alternate Address The court has entered an order making my address confidential under Michigan Court Rule 3.203(F). The following is an alternate address for the court, the friend of the court office, and the other party to use in serving me with notice and other court papers. I will retrieve all my mail regarding this case from this alternate address. Street address Citv State Zip 3. Name Change (Attach order changing name or certificate of marriage.) New name **New Employer** Employer information is confidential by court order. Employername Street address State City Zip Area code and telephone number 5. New Driver's License Expiration date Issuing state License number 6. New Occupational License Issuing state Type of occupation License number Expiration date 7. New Social Security Number ☐ for you for minor child Name Social security number 8. Health Care Insurance Provider Provider name Provider address and telephone number Group number Policy number 9. Other Information: (To be provided as ordered by the court.) (Attach separate sheet.) Signature of party filing the change Name of party filing the change (type or print) Date of filing E-mail address Social security number