



# Cass County Friend of the Court

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“Cass County is an equal opportunity provider and employer”

## COMPLAINT FOR PARENTING TIME

My Case Number is: \_\_\_\_\_

	Mom	Dad
Name		
Street Address:		
City, State, Zip Code:		
Telephone number:		
Email address:		

This complaint is because of:  a Denial of Court Ordered Parenting Time  Other Parenting Dispute

My Complaint is: (Please include exactly what occurred and when—attach additional sheets as necessary—do not write on the back of this form)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I would like the FOC to do the following in response to my Complaint:

Schedule Mediation for me and the other parent so that we can meet with a Mediator and attempt to resolve our differences without having to take this matter to Court

Place this Complaint in my file with the FOC to document the problems I am having with the other parent

Award me make-up parenting time

Consider filing a Show Cause against the other parent for his/her willful violation of the Court Order (make sure to include details as to exactly how the other parent wilfully violated the Court Order)

Schedule a joint meeting between the other parent and me and a FOC staff member to discuss the problems we are having and attempt to resolve those problems without having to take this matter to Court

Other (please specify): \_\_\_\_\_

**PLEASE NOTE: IF YOU THINK YOUR PARENTING TIME OR CUSTODY ORDER SHOULD BE CHANGED, YOU MUST FILE A MOTION TO MODIFY CUSTODY OR PARENTING TIME WITH THE COURT. MOTIONS TO MODIFY CUSTODY AND PARENTING TIME ARE AVAILABLE IN THE FOC OFFICE AND ON THE FOC WEBSITE.**

\_\_\_\_\_  
Signature of person making this Complaint      Date

\_\_\_\_\_  
Printed name of person making this Complaint

### DO NOT WRITE BELOW THIS LINE—FOC USE ONLY

Current Order: \_\_\_\_\_      Action Taken: See response letter

Notes: \_\_\_\_\_

