

## Access to Friend of the Court Records

If you or your attorney would like a copy of your file, you may submit the [Request to Access form](#). More Information about accessing your file is available here [Local Administrative Order](#).

- Case information will only be given to parties involved in a case and the attorneys of record
- Legal advice is not available from the staff; if any inquiry requires legal advice, a private attorney must be consulted.
- You must pre-pay when you submit the Request to Access form. The cost is \$10.00 for the full file or \$1.00 per page.
- If you want your full file, it will be sent to you via email through a secure document management service so it is important that you provide your email address. Instructions on how to download the file will be provided in the email.

## How to Request Access to the Friend of the Court Records

To request access to Friend of the Court records, please fill out the attached form.

### Submit Online (Payment will have to be made separately)

#### 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 [FOC Form Submissions Page](#).
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.

#### 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.

### Submit by Mail

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

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

### Submit Through Drop Box at 82 Ionia

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**. Be sure to include your payment. The drop box is located just past the security checkpoint.

### Submit Through MiChildSupport

You can also submit this form through your MiChildSupport case using the 2-way communicator. Visit: [www.michigan.gov/michildsupport](http://www.michigan.gov/michildsupport).

### Cost

**Payment.** Payment must be made when you request the file. You can pay at the FOC lobby window or use the drop box. Payment must be cash (at the lobby window), money order or certified check payable to Kent County Friend of the Court and indicating "file access".

**File Cost.** The cost is \$10.00 for the complete file. Your file will be sent to you via email through a secure document management service. In order to send it, we must have a verified email address. If you haven't provided a verified email address, please provide it below.

**Document Cost.** If you only want certain documents, the cost is \$1.00 per printed page. If the number of documents exceeds 10, the documents will be emailed to you at a cost of \$10.00.

## How to Retrieve Your CD/Copies

- We will contact you via email when your file is ready.
- The email will contain instructions on how to download the file.

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My email address is: \_\_\_\_\_

I can be reached the at this phone number: \_\_\_\_\_

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STATE OF MICHIGAN 17TH JUDICIAL CIRCUIT Kent COUNTY	REQUEST TO ACCESS FRIEND OF THE COURT RECORDS AND DECISION	CASE NO.
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Friend of the court address and telephone no.  
 KENT COUNTY FRIEND OF THE COURT  
 82 IONIA AVENUE NW STE 200  
 GRAND RAPIDS, MI 49501-0351  
 (877) 543-2660

Plaintiff name

v

Defendant name

Name and mailing address of person requesting access to records

Telephone number(s) where you can be contacted during the friend of the court's normal business hours.

( )

( )

( )

Fax

1. I certify that I am \_\_\_\_\_, an individual entitled to access records. (See instructions on other side.)  
(Specify)

2. I am interested in the following records: (Describe briefly.) \_\_\_\_\_

- 3.  a. I would like to personally inspect the requested records.
- b. I would like copies of the requested records upon receipt by the friend of the court of the copying fee.
- c. I would like to have the friend of the court or designated employee describe or read the requested information to me by telephone or in person.

Date

Signature

**DECISION ON REQUEST**

- Request granted in full.
- Request granted in part.
- Request denied.

Reason for partial request or denial.  Some of the information was confidential because of court rule, law, or court order.

Other: \_\_\_\_\_

Requested access will be provided as follows: \_\_\_\_\_  
Date Time Details

Send \$ \_\_\_\_\_ for copying costs to \_\_\_\_\_. Make check or money order payable to \_\_\_\_\_

Date

Signature

Any person denied access to friend of the court records or confidential information may file a motion for an order of access with the judge assigned to the case or with the chief judge if there is no assigned judge. Contact the friend of the court for further information.