

<b>STATE OF MICHIGAN</b> JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	<b>ORDER OF          DISQUALIFICATION / REASSIGNMENT</b>	<b>CASE NO.</b>
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Court address \_\_\_\_\_ Court telephone no. \_\_\_\_\_

Plaintiff name(s) and address(es)
Plaintiff's attorney, bar no., address, and telephone no.

**v**

Defendant name(s) and address(es)
Defendant's attorney, bar no., address, and telephone no.

In the matter of \_\_\_\_\_

**IT IS ORDERED:**

Judge \_\_\_\_\_ Bar no. \_\_\_\_\_ on motion of

\_\_\_\_\_, is  disqualified under MCR 2.003 from hearing this case

requesting assignment of another judge \_\_\_\_\_ for the following reason:

- a. Interested as a party.
- b. Personally biased or prejudiced for or against a party or attorney.
- c. Consulted or employed as an attorney in the matter in controversy.
- d. Was a partner of a party, attorney for a party, or a member of a law firm representing a party within the preceding two years.
- e. Related within the third degree (civil law) of consanguinity or affinity to a person acting as an attorney or within the sixth degree (civil law) to a party.
- f. The judge's spouse or minor child owns a stock, bond, security, or other legal or equitable interest in a corporation which is a party, unless specifically excepted by MCR 2.003(B)(6)(a)(b) or (c).
- g. Other: (specify)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge Bar no.

**INTERNAL REASSIGNMENT REQUEST**

Judge \_\_\_\_\_ Bar no. \_\_\_\_\_ has been chosen by lot or local administrative order from the judges not disqualified in this case. I request that this case be reassigned to this judge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Court Administrator or Clerk of the Court

Reassignment approved as requested.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Judge Bar no.

**IF ALL JUDGES OF THIS COURT ARE DISQUALIFIED - SEE REVERSE SIDE  
 FOR REASSIGNMENT TO A JUDGE OF ANOTHER COURT**

**ADDITIONAL DISQUALIFICATIONS**

NOTE: If there are not enough signature slots, attach additional sheets

The undersigned judge(s) is/are also disqualified and refer by letter to the reason printed on the front of this form.

**NOTE: IF REASON (g) IS ENTERED THE COMMENT SECTION MUST BE COMPLETED.**

REASON a-g	DATE	SIGNATURE	COMMENT

Initial here if you have decided not to disqualify yourself.

**CHIEF JUDGE DISQUALIFICATION AND  
REQUEST FOR REFERRAL TO SCAO**

All of the judges of this court have disqualified themselves and have signed this order, indicating their reason for disqualification pursuant to MCR 2.003.

I am also disqualified for the following reason \_\_\_\_\_ .

The designated Visiting Judge Clerk shall submit a copy of this order, **ALONG WITH THE REQUEST FOR ASSIGNMENT**, form SCAO 1, to the appropriate State Court Administrative Office to have another judge assigned to hear this case pursuant to MCR 2.003(C)(4).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Judge

\_\_\_\_\_  
Bar no.