

June 2016 Release of SCAO-Approved Court Forms

Below is a list of revised SCAO-approved court forms, released in June 2016. An explanation of the changes to each form is provided, along with instructions on use of previously approved versions and a copy of the form with the changes highlighted. Bookmarks for navigating to the highlighted forms are provided for your convenience.

You can access ZIP files of these forms from the [One Court of Justice website](#) or individually by clicking the links below. You can also purchase the forms in other formats from printers, publishers, and software companies. See the [Court Forms Printers and Publishers list](#).

For questions, comments, or suggestions about these court forms, contact 517-373-2217 or CourtFormsInfo@courts.mi.gov.

[CC 79, Claim of Appeal on Application for Concealed Pistol License](#)

Most recent update: (3/16) version

Use of existing stock: (12/15) version can be used, as appropriate, until stock is depleted

The title of the form was revised to “Claim of Appeal on Application for Concealed Pistol License” to track the language used in the Firearms Act. The caption was revised to state “Appellee” instead of “County Clerk” to allow for appeals of law enforcement agencies as provided in MCL 28.425d. Item 1d was revised to state “failure of the county clerk to reinstate my license under MCL 28.428(2).” to address license reinstatement appeals under MCL 28.428(2). The certificate of mailing was revised to state “defined by MCR 2.107(C)(3)” in accordance with standards. Additional grammatical changes were made.

For a detailed discussion of changes, see the [meeting minutes](#).

[CC 80, Order Following Appeal on Application for Concealed Pistol License](#)

Most recent update: (3/16) version

Use of existing stock: (12/15) version can be used until stock is depleted as appropriate

The copy distribution was revised to indicate the first copy is for the appellant, and the second copy is for the appellee. The title of the form was revised to “Order Following Appeal on Application For Concealed Pistol License” to track the language used in the Firearms Act. The caption was revised to state “Appellee” instead of “County Clerk” to allow for appeals of law enforcement agencies as provided in MCL 28.425d. Item 6 was revised to capitalize “County Clerk.” The certificate of mailing was revised to state “defined by MCR 2.107(C)(3)” in accordance with standards.

For a detailed discussion of changes, see the [meeting minutes](#).

CC 219b, Judgment of Sentence, Commitment to Department of Corrections

Most recent update: (3/16) version

Use of existing stock: (6/15) version can be used until 12/31/2016 with hand correction

Translations (for informational use only): [Arabic](#) [Spanish](#)

The form was revised to comply with 2015 PA 3. In the caption, “Defendant” was revised to “Defendant’s” in accordance with standards. Item 11 and reference to concealed weapon board was removed because county clerks are automatically notified of concealed pistol license revocations and suspensions by the Michigan State Police. Subsequent items were renumbered.

For a detailed discussion of changes, see the [meeting minutes](#).

CC 404, Notice to Prisoner on Application for Leave to Appeal Decision of Parole Board

Most recent update: (3/16) version

Use of existing stock: (3/08) version can be used until 12/31/2016

The form was revised to update court rule citations. Reference to MCR 7.104(D)(2)(c) was replaced with MCR 7.118(D)(3)(b) in the note. The second sentence of the note was removed. Item 1 was revised by adding “Copy” before “attached” in the parenthetical. Item 3 was revised by replacing “pursuant to” with “under” and MCR 7.105(G) with MCR 7.118(F). Citations to MC 791.234(9) and MCR 7.118(D)(3) were added in the footer.

For a detailed discussion of changes, see the [meeting minutes](#).

CIA 03, 14-Day Notice, Civil Infraction

Most recent update: (3/16) version

Use of existing stock: (2/15) version can be used until stock is depleted

The failure to pay language was revised to state, “If you fail to pay the amount due within 14 days of the date of this notice*.” The certificate of service language, date, and signature lines were removed and a “*Date of Notice” field was added to indicate when the notice was issued as provided by MCL 257.321a(2).

For a detailed discussion of changes, see the [meeting minutes](#).

CIA 07, Default Judgment, Civil Infraction

Most recent update: (3/16) version

Use of existing stock: (3/15) version can be used until stock is depleted

The Default Judgment grid was shifted up one typewriter line and “TO” was removed in order to accommodate printer alignment on some case management systems.

*NOTE: Please check with your vendor before making any changes.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 84, Affidavit and Claim, Small Claims

Most recent update: (3/16) version

Use of existing stock: (12/14) version can be used until 12/31/2016 with notice of correction to filing fee

Broken web links were removed from page two of the instructions. Page three of the instructions were revised to comply with 2015 PA 231 (electronic filing system legislation). The caption was revised to allow more space for the court address and telephone number information. The note was revised to state “See additional notice and instructions on the back of plaintiff and defendant copies.” and aligned to the left to allow more space for the court address and telephone number. The citation to the Servicemembers Civil Relief Act was revised to “50 USC App 521.”

For a detailed discussion of changes, see the [meeting minutes](#).

DC 86, Demand and Order for Removal, Small Claims

Most recent update: (3/16) version

Use of existing stock: (3/15) version can be used until stock is depleted

The form was revised to include fields in the caption for both the small claims and general civil case numbers for reference. The language regarding the defendant’s written answer was revised to state “The defendant has 14 days from the date of this order to file a written answer and serve it on the other party or take other lawful action with the court. If the defendant does not answer or take other action within the time allowed, judgment may be entered for the relief demanded in the complaint.” The language in the certificate of mailing was revised to state “as defined by MCR 2.107(C)(3)” to comply with standards.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 100a, Demand for Possession, Nonpayment of Rent, Landlord-Tenant

Most recent update: (3/16) version

Use of existing stock: (1/12) version can be used until stock is depleted

Translations (for informational use only): [Arabic](#) [Spanish](#)

The instructions were revised to remove broken web links on pages two and four. The “How to Get Legal Help” section on the tenant’s copy was revised to update the web link from www.michiganlegalaid.org to www.michiganlegalhelp.org.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 100b, Demand for Possession, Damage/Health Hazard to Property, Landlord-Tenant

Most recent update: (3/16) version

Use of existing stock: (1/12) version can be used until stock is depleted

The instructions were revised to remove broken web links on pages two and four. The “How to Get Legal Help” section on the tenant’s copy was revised to update the web link from www.michiganlegalaid.org to www.michiganlegalhelp.org.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 100d, Demand for Possession, Termination of Tenancy, Mobile Home Park - Mobile Home Owner (Just-Cause Termination)

Most recent update: (3/16) version

Use of existing stock: (1/12) version can be used until stock is depleted

Translations (for informational use only): [Arabic](#) [Spanish](#)

The instructions were revised to remove broken web links on pages two and four. The “How to Get Legal Help” section on the tenant’s copy was revised to update the web link from www.michiganlegalaid.org to www.michiganlegalhelp.org. The Explanation of Just-Cause Terminations was updated to reference the Michigan Department of Health and Human Services instead of the Michigan Department of Public Health.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 100e, Demand for Possession, Termination of Tenancy Due to Unlawful Drug Activity on Premises, Landlord-Tenant

Most recent update: (3/16) version

Use of existing stock: (9/12) version can be used until stock is depleted

The instructions were revised to remove broken web links on pages two and four. The “How to Get Legal Help” section on the tenant’s copy was revised to update the web link from www.michiganlegalaid.org to www.michiganlegalhelp.org.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 106, Judgment of Possession after Land Contract Forfeiture

Most recent update: (3/16) version

Use of existing stock: (3/11) version can be used until 12/31/2016

Item 4 was revised to state “There is no cause of action.” New items 5, 5a, and 5b were created below item 4 to track the language of MCL 600.5744(3). Item 7 (formerly item 6) was revised to state, “An order of eviction may be issued upon expiration of 90 days 6 months after entry

of this judgment if the defendant does not: [] a. pay the total amount due in item 3. [] b. cure the following breach: _____” to track MCL 600.5744(3). In item 8, “under” replaced “pursuant to.” The second sentence in item 10 (formerly item 9) was revised to state “Any motion or appeal must comply with the court rules...” for clarity. All items were renumbered accordingly. A citation to MCL 600.5744(3). The citation to the Servicemembers Civil Relief Act was revised to “50 USC App 521.”

For a detailed discussion of changes, see the [meeting minutes](#).

DC 107, Application and Order of Eviction, Landlord-Tenant/Land Contract

Most recent update: (3/16) version

Use of existing stock: (3/15) version can be used until stock is depleted

Translations (for informational use only): [Arabic](#) [Spanish](#)

The caption was modified to state “Plaintiff’s” and “Defendant’s” in accordance with standards. The court seal was removed from the order of eviction section because it is not required by statute or court rule. A case number box was added above the return section of the form for reference to accommodate printing on two pages. The word “back” was revised to “other” in the return section to accommodate printing on two pages.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 110, Order to Release Escrow, Landlord-Tenant

Most recent update: (3/16) version

Use of existing stock: (4/87) version can be used until stock is depleted

The form number was revised to DC 110 instead of DCH 110. The caption was modified to state “Plaintiff’s” and “Defendant’s.” A clerical error was revised in item 2. A citation to MCR 4.201(N) was added in the footer.

For a detailed discussion of changes, see the [meeting minutes](#).

DC 225, Complaint and Warrant, Misdemeanor

Most recent update: (3/16) version

Use of existing stock: (6/15) version can be used until 12/31/2016

The form was revised to include a parenthetical after Codefendant(s) stating “(if known)” to indicate the field is not required unless information is known. On the warrant copy, item c was revised to state “interim cash bail” to more accurately portray the language used in MCR 6.102(F). The court seal was removed because it is not required by statute or court rule. Citations

to MCL 780.581 and MCR 6.102(F) were added to the footer.

For a detailed discussion of changes, see [item 1d](#), [item 2](#), and [item 3](#) of the meeting minutes.

DC 226, Warrant, Misdemeanor, Traffic/Nontraffic

Most recent update: (3/16) version

Use of existing stock: (5/07) version can be used until 12/31/2016

The caption was modified to state “Defendant’s name and address” in accordance with standards. The text was revised to state “defendant may be released when interim cash bail is posted...” to more accurately portray the language used in MCR 6.102(F). A field for “Bar no.” was added to the Judge/Magistrate signature line. The court seal was removed because it is not required by statute or court rule. Citations to MCL 780.581 and MCR 6.102(F) were added to the footer.

For a detailed discussion of changes, see [item 1d](#) and [item 2](#) of the meeting minutes.

DC 255, Notice to Prosecuting Official (Victim’s Rights Act)

Most recent update: (3/16) version

Use of existing stock: (6/04) version can be used until 6/10/2016

The form was revised to comply with 2014 PA 130. “Enticing a child for immoral purposes (MCL 750.145a)” was removed from the form because it is no longer listed as a serious misdemeanor. The following were added to the form as a result of statutory changes:

Contributing to the neglect of delinquency of a minor (MCL 750.145)

Using the internet or a computer to make a prohibited communication (MCL 750.145d)

Intentionally aiming a firearm without malice (MCL 750.233)

Injuring a worker in a work zone (MCL 257.601b)

The acronym for operating a vessel while under the influence was revised to “OVWI.”

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 6a, Supervision Order (Support Enforcement)

Most recent update: (3/16) version

Use of existing stock: N/A, New Form

This form was created to order a defendant to be specifically supervised by the friend of the court. It is intended to be attached to FOC 6, Support Enforcement Order.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 22, Employer's Disclosure of Income and Health Insurance Information

Most recent update: (3/16) version

Use of existing stock: (3/15) version can be used until 3/31/2017

The notice to employer section was revised to include a direction in bold stating “Complete both sides.” All income information fields were combined on page one for consistency. The checkbox at the bottom of page one was revised to state “[] Complete the Insurance Information on other side.” The parenthetical in item 23 (formerly item 7) stating “Skip to item 14.” was removed. The second parenthetical in item 23 (formerly item 7) was revised to state, “(Complete items 24 through 29. If you need additional space, use the space below.)” All insurance information fields were combined on page two for consistency. The note on page two to return the completed form to the friend of the court was removed because it appears on page one. The note for the additional space section was revised to state “Use this space for any necessary explanations.” Additional changes were made for grammatical purposes.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 23, Verified Statement

Most recent update: (3/16) version

Use of existing stock: (3/13) version can be used until 3/31/2017

The title of the form was revised to “Verified Statement” because the Title IV-D application was removed as a result of an Office of Child Support policy determination. Reference to mother was removed and replaced with “parent” in items 1, 2 and 20. A new item 13 was created and titled “Gender” to comply with MCR 3.206(B)(1)(e). All items were renumbered accordingly. The field for maiden name was removed. Item 20 and 21 were combined and revised to state “Did this parent apply for or receive public assistance? If yes, please specify kind and case number.” Reference to father was removed and replaced with “Other parent” in item 21 (formerly item 22) and “Parent” in items 22 (formerly item 23), and 40. A new item 33 was created and titled “Gender” to comply with MCR 3.206(B)(1)(e). Former items 40 and 41 were combined and revised to state “Did this parent apply for or receive public assistance? If yes, please specify kind and case number.” Item 41a (formerly item 42a) was revised to state “Name and sex of minor child in case.” A small column with heading “M / F” was added to the end of item 41a as a writing space to indicate the sex of the child. Item 42a (formerly item 43a) was revised to state “Name and sex of minor child of either party.” A small column with heading “M / F” was added to the end of item 42a as a writing space to indicate the sex of the child. The statement regarding public assistance information was moved below the date and signature lines. The language was revised to include the second sentence “If you want child support services, complete form DHS 1201-D, available at your local friend of the court office or courts.mi.gov/Administration/SCAO/Forms/courtforms/domesticrelations/generalfoc/dhs1201d.pdf. The checkbox for requesting Title IV-D services was removed as a result of an Office of

Child Support policy determination.”

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 30, Notice of Registration of Out-of-State Support Order

Most recent update: (3/16) version

Use of existing stock: (5/10) version can be used until stock is depleted

The citation to MCL 552.1621 *et seq.* was replaced with MCL 552.2605 *et seq.* to comply with 2015 PA 255, which replaced the previous UIFSA code.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 30a, Order Vacating/Confirming Registration of Out-of-State Support Order (UIFSA)

Most recent update: (3/16) version

Use of existing stock: (5/10) version can be used until stock is depleted

“Fax no.” was removed from the caption in accordance with standards. The citation to MCL 552.1631 *et seq.* was replaced with MCL 552.2607 and MCL 552.2608 to comply with 2015 PA 255, which replaced the previous UIFSA code.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 55, Statement of Account

Most recent update: (3/16) version

Use of existing stock: (3/09) version can be used until stock is depleted

The citation to MCL 552.1601(1)(c) was replaced with MCL 552.2602(1)(c) to comply with 2015 PA 255, which replaced the previous UIFSA code.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 61, Objection to Ex Parte Order and Motion to Rescind or Modify

Most recent update: (3/16) version

Use of existing stock: (3/11) version can be used until 12/31/2016 with notice of correction to filing fee

The statement “3. Pay the motion fee to the clerk?” was removed from the motion checklist on page two because there is no filing fee for this objection. Subsequent items in the checklist were renumbered. The instructions on page three were revised to indicate that there is no filing fee. A note was added below “Please print or type information” stating “Note: There is no filing fee.” In the notice of hearing section, “Bar no.” was added to the judge/referee line in accordance with

standards. The citation to MCL 722.27a in the footer was updated to MCL 722.27a(12), (13). A citation to MCR 3.207(B) was added to the footer.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 62, Order Modifying Ex Parte Order

Most recent update: (3/16) version

Use of existing stock: (3/11) version can be used until stock is depleted

Internal references on pages two and four were updated. The citation to MCL 722.27a in the footer was updated to MCL 722.27a(12), (13).

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 87, Motion Regarding Custody

Most recent update: (3/16) version

Use of existing stock: (3/14) version can be used until stock is depleted

The instructions on page one and four were updated. The word “or” was added at the end of the second bullet point. A new bullet point was created to state that you can use the form if “you want to change domicile of the child(ren) to another state or to more than 100 miles away. You must also use form FOC 115, Motion to Change Domicile.” The caption was revised to state “Court telephone no.” in accordance with standards. In item 8, the word “be” was unbolded. In the notice of hearing section, the ADA/LEP language was replaced with the standard ADA/LEP language.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 90, Notice of Lien

Most recent update: (3/16) version

Use of existing stock: (5/10) version can be used until stock is depleted

“Fax no.” was removed from the caption in accordance with standards. The citation to MCL 552.1603 was replaced with MCL 552.2603 to comply with 2015 PA 255, which replaced the previous UIFSA code.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 104, Request to Reopen Friend of the Court Case

Most recent update: (3/16) version

Use of existing stock: (3/09) version can be used until 6/10/2016

The caption was revised to state “Court telephone no.” in accordance with standards. The checkbox to apply for Title IV-D Services was replaced with the statement “I have attached a completed Verified Stated (form FOC 23) and a completed application for Title IV-D child support services.” as a result of an Office of Child Support policy determination.

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 106, Notice of Redirection or Abatement of Child Support

Most recent update: (3/16) version

Use of existing stock: (3/09) version can be used until 3/31/2017

The form was revised to comply with 2014 PA 380. The copy distribution was revised to include 3rd and 4th copies for the following: “3rd copy – Current support recipient” and “4th copy – Proposed support recipient.” The caption was revised and “Person with whom minor child(ren) living” was replaced with “Current support recipient’s name and address.” A new field was added below the current support recipient with the title “Proposed support recipient” to clarify who the proposed recipient will be. Item 1 was revised to state “The friend of the court has been advised that the minor child(ren) named below is/are no longer in the care of the current support recipient: _____.”

Child(ren)’s name(s)

The words “legally responsible for” were replaced with “providing” in item 2 to comply with 2014 PA 380. The word “since” was replaced with “because” in accordance with standards. In the certificate of mailing section, the words “person with legal responsibility for the minor child(ren)” were replaced with “person(s) named above.”

For a detailed discussion of changes, see the [meeting minutes](#).

FOC 120, Dismissal (Domestic Relations)

Most recent update: (3/16) version

Use of Existing Stock: N/A, New Form

This form was created to accommodate an Office of Child Support policy determination on 45 CFR 303.11. The form includes Title IV-D dismissal language and copy distribution to the friend of the court. The Title IV-D dismissal language could not be accommodated on

MC 09, Dismissal in a clear manner. For that reason, this form was created.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 10, Judgment, Civil

Most recent update: (3/16) version

Use of Existing Stock: (3/13) version can be used until stock is depleted

A new line and statute reference was added under Costs in the Order of Judgment section for statutory costs under MCL 600.2441. The text below the attorney signature lines was revised to state "...unless a motion for new trial or an appeal is filed within 21 days after the judgment date." The certificate of mailing section was revised to state "as defined by MCR 2.107(C)(3)." in accordance with standards. The citation to the Servicemembers Civil Relief Act was updated to "50 USC App 521."

For a detailed discussion of changes, see the [meeting minutes](#).

MC 15a, Order Regarding Installment Payments

Most recent update: (4/16) version

Use of existing stock: (8/12) version can be used until stock is depleted

Translations (for informational use only): [Arabic](#) [Spanish](#)

The words "affidavit and" were removed from item 6 because an affidavit is not required to set aside an order regarding installment payments. The certificate of mailing section was revised to state "as defined by MCR 2.107(C)(3)." in accordance with standards.

MC 25, Notice of Intent to Escheat Unclaimed Personal Property

Most recent update: (4/16) version

Use of existing stock: (3/08) version can be used until depleted

The form was revised to comply with 2015 PA 242. The court use note was revised to state "This notice must be sent not less than 60 days or more than 365 days before filing a report with the State Treasurer regarding the property if the property has a value of \$50 or more. MCL 567.238(5)." The address for the Michigan Department of Treasury Unclaimed Property Division was updated. A citation to MCL 567.224a was added to the form.

MC 26, Notice of Intent to Dismiss for No Progress

Most recent update: (3/16) version

Use of existing stock: (3/08) version can be used until 12/31/2016

A note was added to the bottom of the form for Title IV-D case closures stating "For domestic relations cases, if you applied for Title IV-D child support services and your case is dismissed,

your services will stop 60 days after the date of this notice. If you do not want your Title IV-D services to stop and you need child support services, please contact the Office of Child Support at 1-866-540-0008.”

For a detailed discussion of changes, see the [meeting minutes](#).

MC 49, Objections to Garnishment and Notice of Hearing

Most recent update: (3/16) version

Use of existing stock: (9/15) version can be used until stock is depleted

The certificate of mailing section was revised to state “as defined by MCR 2.107(C)(3).” in accordance with standards. The instructions were revised to state “There is no cost for filing an objection except in probate court cases.” to comply with MCL 600.880b. Additional changes were made for grammatical purposes.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 200, Felony Set

Most recent update: (3/16) version

Use of existing stock: (6/15) version can be used until 12/31/2016

The form was revised to include a parenthetical after Codefendant(s) stating “(if known)” to indicate the field is not required unless information is known. The court seal was removed because it is not required by statute or court rule. On the Bindover/Transfer After Preliminary Examination copy, the note at the bottom of the page was revised to state “printed on other side.” Items 5 and 6 of the Juvenile Bindover/Transfer section were revised to remove “m.” from the time fields.

For a detailed discussion of changes, see [item 1d](#) and [item 3](#) of the meeting minutes.

MC 203, Writ of Habeas Corpus

Most Recent Update: (5/16) version

Use of existing stock: (3/12) version can be used until depleted

Item 2 was revised to include a checkbox option that allows courts to specify charges and whether the crime is a felony or misdemeanor for MDOC writ processing.

For more information on the changes, see the [Trial Court Services memo](#).

MC 204, Order for Competency Examination

Most recent update: (3/16) version

Use of existing stock: (5/07) version can be used until stock is depleted

A new item 6 titled “Other” was created to allow courts to include additional orders.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 219, Judgment of Sentence/Commitment to Jail

Most recent update: (3/16) version

Use of existing stock: (6/15) version can be used until 12/31/2016 if checkbox option in item 11 is stricken

Translations (for informational use only): [Arabic](#) [Spanish](#)

The caption was revised to state “Defendant’s” in accordance with standards. Item 1 was revised to state “the crime(s) stated below:” for consistency. Item 4 was revised to state “Sanctions are reportable to State Police**.” Items 6, 10, 11, 12, and 13 were revised to state “The defendant” for grammatical purposes. The checkbox option in item 11 was revised to state “[] The defendant shall serve ___ days in jail for failure to pay on time, as part of a conditional sentence. Prior to enforcement of jail time for failing to pay, the court must determine the defendant’s ability to pay.” to accommodate conditional sentences and ability to pay requirements. Item 15 and reference to concealed weapon board was removed because county clerks are automatically notified of concealed pistol license revocations and suspensions by the Michigan State Police. Subsequent items were renumbered. A citation to MCL 769.3 was added to the footer. The word “currently” was removed from page two.

For a detailed discussion of changes, see [item 1e](#) and [item 5](#) of the meeting minutes.

MC 220, Recall of Warrant/Order to Apprehend and Removal from LEIN

Most recent update: (3/16) version

Use of existing stock: (3/02) version can be used until stock is depleted

The form was completely revised to accommodate courts that enter their own LEIN information and to accommodate new technological options of transmission. The copy distribution was revised to state “1st copy – Law enforcement (if applicable), 2nd copy – Law enforcement for return to court, 3rd copy – Tickler file (if applicable), 4th copy – Friend of the court (if applicable).” The caption was also revised to remove the warrant/order to apprehend number and the field for police agency and address was removed. The words “Law Enforcement Information Network” were removed from item 2. A new section titled “Notice of Recall” replaced “Court Call to Police.” A parenthetical stating “Complete this section if your court does not recall its own warrants in LEIN” was placed to the left of the section header. The section states “Contact the law enforcement agency immediately after the person appears in court on the warrant/order

to apprehend. Advise the law enforcement agency to recall the warrant/order to apprehend. Unless you have an established protocol with your law enforcement agency to receive notice of this recall by e-mail or fax, you must make contact by phone. Use the space provided below to indicate the date, time, and name or method of contact.

Date	Time	Name of Person/E-mail address/Fax no.
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TO: _____
Law enforcement agency

Immediately after being notified of this recall, remove the LEIN entry in this case and complete and return the Certificate of Removal from LEIN to the court.”

A header for Certification of Removal from LEIN was added, along with a sentence stating “I certify that the LEIN entry in this case has been removed from LEIN files.” and date and signature lines.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 222, Request for Court-Appointed Attorney and Order

Most recent update: (3/16) version

Use of existing stock: (3/09) version can be used until stock is depleted

The caption was revised to state “Defendant’s” in accordance with standards. The reference to the Michigan Department of Social Services was updated to state “DHHS.” The writing space line was removed in item 9 to allow courts a larger writing field. The district court endorsement field was removed.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 227, Application to Set Aside Conviction

Most recent update: (5/16) version

Use of existing stock: (1/16) version can be used until stock is depleted.

A colon was added to the word “Instructions” on page two and the word was aligned left. Item 10 of the instructions was revised to state “Mail a copy of the application packet to the correct prosecuting official where the conviction occurred (county, city, or township) by first-class mail. See www.michiganprosecutor.org/about-us-menu/prosecutor-directory for the address of county prosecutors.”

For a detailed discussion of changes, see the [meeting minutes](#).

MC 229, Motion, Affidavit, and Bench Warrant

Most recent update: (3/16) version

Use of existing stock: (3/15) version can be used until stock is depleted

The form was revised to include additional LEIN information in the bench warrant section. The revised section states “Full name (type or print), Date of birth*, Address, City, State, Zip, DLN, Sex*, Eye color, Hair color, Height, Weight, Race*, Scars, tattoos, etc.” and a note stating “*These items **must** be filled in for the police/sheriff to enter on LEIN; the other items are not required but are helpful.”

For a detailed discussion of changes, see the [Criminal Work Group meeting minutes](#) and the [Civil Work Group meeting minutes](#).

MC 240, Pretrial Release Order

Most recent update: (5/16) version

Use of existing stock: (1/08) version can be used until stock is depleted

The form was revised because of the 2016 amendments to MCR 6.106. A separate custody order form, MC 240b, Custody Order, was created and the custody order portions previously on MC 240 were moved. The copy distribution was revised to state, “2nd copy – Defendant, 3rd copy – Originating law enforcement agency (when applicable), 4th copy – LEIN copy for court files.” The title of the form was revised to “Pretrial Release Order” for clarity. The checkbox for Bond denied was removed because it no longer applies to this form. All items were renumbered. A finding was added to comply with MCR 6.106(C) and (D). The citation to 18 USC 921(a)(32) was updated. A checkbox was added in item 5 (formerly item 3) stating, “[] While in custody, the defendant/juvenile shall not contact (specify name(s) and manner of contact): _____” to comply with MCR 6.106(D)(2)(m). Item 7 (formerly item 5) was revised to state “and LEIN entry shall be removed.” for grammatical purposes. On the court memo copy, the checkbox grid indicating why the defendant/juvenile was not released was removed. On the Sheriff/Facility copy, the court seal was removed because it is not required by statute or court rule.

For a detailed discussion of changes, see [item 1d](#) and [item 9](#) of the meeting minutes. See also the [Trial Court Services memo](#).

MC 240b, Custody Order

Most recent update: (3/16) version

Use of existing stock: N/A, New Form

This form was created because of 2016 amendments to MCR 6.106 and the custody order portions previously on MC 240 were moved to this form. In addition, item 2 was created to allow the court to specify conditions of custody as provided in MCR 6.106(B)(5).

For a detailed discussion of changes, see the [meeting minutes](#).

MC 246, Motion and Summons Regarding Probation Violation

Most recent update: (3/16) version

Use of existing stock: (3/09) version can be used until 12/31/2016

The word “at” replaced “for” in the request. The standard ADA/LEP language was added to the summons section below the date and signature lines.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 256, Summons, Criminal

Most recent update: (3/16) version

Use of existing stock: (5/07) version can be used until 12/31/2016

The form was revised to include a parenthetical after Codefendant(s) stating “(if known)” to indicate the field is not required unless information is known. The standard ADA/LEP language was added to the summons section. The court seal was removed because it is not required by statute or court rule. The proof of service was revised to include fields for incorrect address fee, miles traveled, fee, and total fee in accordance with standards.

For a detailed discussion of changes, see [item 1a](#), [item 1d](#), and [item 3](#) of the meeting minutes.

MC 263, Motion/Order of Nolle Prosequi

Most recent update: (3/16) version

Use of existing stock: (3/09) version can be used until 12/31/2016

The note at the bottom of the form was revised to clarify when the Michigan State Police will destroy fingerprints and arrest cards. The note states, “Your fingerprints and arrest card will be destroyed by the Michigan State Police if you have been found not guilty. They may also be destroyed after motion and order for destruction of fingerprints (forms MC 235 and MC 392).”

For a detailed discussion of changes, see the [meeting minutes](#).

MC 294, Order Delaying Sentence

Most recent update: (3/16) version

Use of existing stock: (6/15) version can be used until 12/31/2016 if checkbox option in item 9 is stricken

Items 1, 5, 8, 9, and 10 were revised to state “The defendant” for grammatical purposes. Item 1 was revised to state “the crime(s) stated below:” for consistency. Item 3 was revised to state “Conviction reportable to Secretary of State**.” and a blank writing space was provided for the defendant’s driver’s license number. The checkbox option in item 9 was revised to state “[] The defendant shall serve ___ days in jail for failure to pay on time, as part of a conditional sentence. Prior to enforcement of jail time for failing to pay, the court must determine the defendant’s ability to pay.” to accommodate conditional sentences and ability to pay requirements. Item 12 and reference to concealed weapon board was removed because county clerks are automatically notified of concealed pistol license revocations and suspensions by the Michigan State Police. Subsequent items were renumbered. A double asterisk was added to the note in order to correspond with item 3. A citation to MCL 769.3 was added to the footer.

For a detailed discussion of changes, see [item 1e](#) and [item 5](#) of the meeting minutes.

MC 305, Order for Security for Costs

Most recent update: (3/16) version

Use of existing stock: (3/85) version can be used until stock is depleted

The caption was revised to state “Plaintiff’s name(s), address(es), and telephone no(s).” and “Defendant’s name(s), address(es), and telephone no(s).” in accordance with standards. Item 1 was revised to include the word “Name” as a caption to the writing spaces. A citation to MCR 2.109 was added to the footer.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 390, Ex Parte Motion and Order to Renew Civil Judgment

Most recent update: (3/16) version

Use of existing stock: (3/11) version can be used until stock is depleted

The caption was revised to state “Plaintiff’s” and “Defendant’s” in accordance with standards. A checkbox stating “[] scheduled for hearing.” was added to the order section.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 406a, Petition to Discontinue Sex Offender Registration

Most recent update: (3/16) version

Use of existing stock: (9/11) version can be used until 12/31/2016

Broken web links were removed from pages two and nine of the instructions. The caption was revised to state “Defendant’s” in accordance with standards. The standard ADA/LEP language was added to the notice of hearing section. The certificate of mailing language was revised to state “I certify on this date I served a copy of this petition and notice of hearing on the prosecuting official by first-class mail addressed to his/her last-known address as defined by MCR 2.107(C)(3).” in accordance with standards.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 443, Motion to Destroy DNA Profile and Sample

Most recent update: (3/16) version

Use of existing stock: N/A, New Form

This form was created to allow defendants or juveniles to motion the court and request that their DNA profile and sample be destroyed under MCL 28.176.

For a detailed discussion of changes, see the [meeting minutes](#).

MC 444, Order to Destroy DNA Profile and Sample

Most recent update: (3/16) version

Use of existing stock: N/A, New Form

This form was created to allow courts to order the Michigan State Police to destroy a DNA profile and sample under MCL 28.176.

For a detailed discussion of changes, see the [meeting minutes](#).

PCA 318, Order Terminating Parental Rights/ Rights of Person In Loco Parentis after Release or Consent

Most recent update: (3/16) version

Use of existing stock: (2/15) version can be used until stock is depleted

The form was revised to remove a comma after the citation MCL 712B.1 *et seq.* in the footer.

PCA 328, Certificate of Adoptive Information

Most recent update: (3/16) version

Use of existing stock: (2/15) version can be used until stock is depleted

The form was revised to correct the numbering of items 2, 3, and 4.

PCA 347, Petitioner's Verified Accounting

Most recent update: (3/16) version

Use of existing stock: (2/15) version can be used until stock is depleted

A clerical error was corrected in the first paragraph. The note was revised to state, "This accounting must be filed at least 7 days before...."

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	CLAIM OF APPEAL ON APPLICATION FOR CONCEALED PISTOL LICENSE	CASE NO.
--	--	-----------------

Court address Court telephone no.

Appellant's name, address, and telephone no.

Appellee's name, address, and telephone no.

v

Appellant's attorney, bar no., address, and telephone no.

CLAIM OF APPEAL

1. I appeal the

a. statement of statutory disqualification as provided by the county clerk under MCL 28.425b(11) because:
(Specify the reasons on a separate sheet. Attach supporting documentation.)

b. failure to provide a receipt under

MCL 28.425b(1) by the county clerk.

MCL 28.425b(9) by _____
Name of entity alleged to have failed to provide receipt

MCL 28.425l(3) by the Michigan State Police. county clerk.

c. failure of the county clerk to issue a license to a carry a concealed pistol. The application filed on _____
complied with MCL 28.425b(1), (5), and (9). Date

d. failure of the county clerk to reinstate my license under MCL 28.428(2).

2. I am filing this appeal in the circuit court of the county in which I reside.

Date

Appellant/Attorney signature

REQUEST FOR CERTIFIED RECORD

I request that the county clerk send a certified copy of the record to the _____ Circuit Court.
Circuit court number or name of county

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this claim of appeal on all parties by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	ORDER FOLLOWING APPEAL ON APPLICATION FOR CONCEALED PISTOL LICENSE	CASE NO.
--	---	-----------------

Court address Court telephone no.

Appellant's name, address, and telephone no.

Appellee's name, address, and telephone no.

v

Appellant's attorney, bar no., address, and telephone no.

THE COURT FINDS:

- 1. The notice of statutory disqualification
 - a. was was not arbitrary and capricious
 - b. was was not clearly erroneous.
- 2. The failure to provide a receipt under MCL 28.425b(1) MCL 28.425b(9) MCL 28.425l(3)
 - a. was was not arbitrary and capricious
 - b. was was not clearly erroneous.
- 3. The failure to issue a license
 - a. was was not arbitrary and capricious
 - b. was was not clearly erroneous.
- 4. The appeal is frivolous.

IT IS ORDERED:

- 5. The appeal is denied.
- 6. The _____ County Clerk shall issue a license receipt as required by the Firearms Act.
 - a. The _____ Entity name shall refund \$ _____ to the appellant for the filing fees the appellant incurred to file this appeal.
 - b. The appellant's actual costs and attorney fees of \$ _____ shall be paid as follows, according to the degree of responsibility.
 - _____ County name County Clerk shall pay _____ % of the costs and fees.
 - _____ Entity taking fingerprints shall pay _____ % of the costs and fees.
 - The State of Michigan shall pay _____ % of the costs and fees.

(continued on other side)

7. The appeal is dismissed. The appellant shall pay the following actual costs and attorney fees to the

a. _____ County Clerk in the amount of \$ _____ .
County name

b. _____ in the amount of \$ _____ .
Entity taking fingerprints

c. The State of Michigan in the amount of \$ _____ .

8. Other:

Date

Judge

Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined **by** MCR 2.107(C)(3).

Date

Court clerk

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	JUDGMENT OF SENTENCE COMMITMENT TO DEPARTMENT OF CORRECTIONS	CASE NO.
--	---	-----------------

ORI _____ Court address _____ Court telephone no. _____
 MI- _____
 Police Report No. _____

THE PEOPLE OF THE STATE OF MICHIGAN	v	
Prosecuting attorney's name _____	Bar no. _____	

Defendant's name, address, and telephone no.		
CTN/TCN	SID	DOB
Defendant attorney's name _____		Bar no. _____

THE COURT FINDS:

1. The defendant was found guilty on _____ of the crime(s) stated below.
Date

Count	CONVICTED BY			DISMISSED BY*	CRIME	CHARGE CODE(S) MCL citation/PACC Code
	Plea*	Court	Jury			

*Insert "G" for guilty plea, "NC" for nolo contendere, or "MI" for guilty but mentally ill, "D" for dismissed by court, or "NP" for dismissed by prosecutor/plaintiff.

- 2. The conviction is reportable to the Secretary of State under MCL 257.625(21)(b). _____
- 3. HIV testing and sex offender registration are completed. _____ Defendant's driver's license number
- 4. The defendant has been fingerprinted according to MCL 28.243.
- 5. A DNA sample is already on file with the Michigan State Police from a previous case. No assessment is required.

IT IS ORDERED:

- 6. Probation is revoked.
- 7. Participating in a special alternative incarceration unit is prohibited. permitted.
- 8. The defendant is sentenced to custody of the Michigan Department of Corrections. This sentence shall be executed immediately.

Count	SENTENCE DATE	MINIMUM			MAXIMUM			DATE SENTENCE BEGINS	JAIL CREDIT		OTHER INFORMATION
		Years	Mos.	Days	Years	Mos.	Days		Mos.	Days	

- 9. Sentence(s) to be served consecutively to _____ (If this item is not checked, the sentence is concurrent.)
 each other. case numbers _____

10. The defendant shall pay:

State Minimum	Crime Victim	Restitution	DNA Assess.	Court Costs	Attorney Fees	Fine	Other Costs	Total
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

The due date for payment is _____. Fine, costs, and fees not paid within 56 days of the due date are subject to a 20% late penalty on the amount owed.

- 11. The defendant is subject to lifetime monitoring under MCL 750.520n.

12. Court recommendation:

Date Judge Bar no.

I certify that this is a correct and complete abstract from the original court records. The sheriff shall, without needless delay, deliver the defendant to the Michigan Department of Corrections at a place designated by the department.

(SEAL)

Deputy court clerk

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	NOTICE TO PRISON ON APPLICATION FOR LEAVE TO APPEAL DECISION OF PAROLE BOARD	CIRCUIT CASE NO: APPEAL CASE NO: JUDGE:
--	---	--

Court address

Court telephone no.

<p style="text-align: right; margin: 0;">Appellant</p> <p><input type="checkbox"/> THE PEOPLE OF THE STATE OF MICHIGAN</p> <p><input type="checkbox"/> _____</p>	v	<p>Prisoner's name, address, and inmate no. (if known) Appellee</p>
--	---	---

NOTE: This form is required **under MCR 7.118(D)(3)(b).**

TO THE PRISONER:

1. An application for leave to appeal a decision to grant parole is being filed with the circuit court. (Copy attached.)
2. You are not required to respond to the attached application. If you wish to respond to the application for leave to appeal, you may respond yourself or hire an attorney to respond for you.
3. If an order of parole is issued **under** MCL 791.236 before the appellate proceedings are completed, a stay may be granted in the manner provided by **MCR 7.118(F)**, except that no bond is required.

TO THE PRISON/FACILITY: You are required to personally serve this notice, the application for leave to appeal, and any supporting documents on the prisoner named above. After service on the prisoner, you must complete the proof of service on the prisoner and file it with the clerk of the court.

PROOF OF SERVICE

I certify that on this date I served copies of this notice, the application for leave to appeal and any supporting documents by registered or certified mail, return receipt requested on the parole board, the prosecutor (if filed by victim), the victim (when appropriate), and on the facility where the prisoner is incarcerated.

_____ Date

_____ Signature of applicant/attorney

Note: Attach copies of the return receipts from the parole board and the prosecutor (when filed by the victim) and from the victim (when appropriate), and file a copy of this proof of service with the clerk of the court.

PROOF OF SERVICE ON PRISONER

I certify that on this date I personally served this notice, the application for leave to appeal, and any supporting documents on the prisoner named above.

_____ Date

_____ Signature of prison official

**STATE OF MICHIGAN
JUDICIAL DISTRICT**

**14-DAY NOTICE
Civil Infraction**

CASE NO.

Court address

Court telephone no.

Civil infraction: _____ Infraction date: _____

The State Twp. City Village of: _____ Statute Ordinance

v [Defendant name, address, and telephone no.]

<p align="center">NOTICE OF FAILURE TO COMPLY WITH JUDGMENT</p> <p>Amount due: \$ _____</p> <p>*Date of Notice: _____</p>

If you fail to pay the amount due within 14 days of the date of this notice,*

1. the Secretary of State will immediately suspend your driving privileges for most driving offenses.
2. a bench warrant may be issued for your arrest.
3. the cost to compel appearance may be added to the amount of your judgment.
4. your operator's license will not be issued or renewed if this notice is for multiple parking violations or a nontraffic state civil infraction.



**CONTINUOUS CONSTRUCTION
POSTCARD**
Computer or typewriter generated

Approved, SCAO	Original - Court	Copy - Defendant
STATE OF MICHIGAN JUDICIAL DISTRICT	DEFAULT JUDGMENT Civil Infraction	Court Telephone No.
<p>The <input type="checkbox"/> State <input type="checkbox"/> Twp. <input type="checkbox"/> City <input type="checkbox"/> Village of: _____ v Defendant (name and address printed on other side)</p> <p>DEFAULT ENTRY I certify that the</p> <ol style="list-style-type: none"> 1. defendant has not made a scheduled appearance or answered a citation within time allowed by statute. 2. defendant is not in the military service, or is in the military service but received notice and adequate time and opportunity to appear and defend. 3. default is entered against the defendant. <p>DEFAULT JUDGMENT is entered in the amount stated on the other side.</p> <p>Return this notice with payment in the amount of the judgment stated on the other side of this form. Fines, costs, and other financial obligations imposed by the court must be paid at the time of assessment. If you fail to pay within 28 days of the default judgment date, the court may notify the Secretary of State to take action against your driving privileges. In addition, fines, costs, and fees not paid within 56 days of the default judgment date are subject to a 20% late penalty on the amount owed.</p> <p>CERTIFICATE OF SERVICE I certify that on this date I served a copy of this judgment on the defendant by first-class mail addressed to his/her last-known address as defined by MCR 2.107(C)(3). Date of Default/Judgment* _____ Date of entry and mailing _____ Clerk/Deputy clerk/Magistrate _____</p> <p>NOTICE: You may have the right to set aside a default by requesting a hearing within 14 days of the mailing date. You must post a bond equal to the total fines and costs noted when requesting a hearing to set aside a default.</p> <p>CIA 07-JIS (3/16) DEFAULT JUDGMENT, Civil Infraction MCR 1.110, MCR 4.101(B)</p>		



Box moved up one typewriter line.

DEFAULT JUDGMENT Civil Infraction	
Case Number	
Infraction Date	
Civil Infraction	
Vehicle Plate No.	
Appearance Date	Default/Judgment Date*
AMOUNT OF JUDGMENT	
Fines	\$
Costs	\$
State Costs	\$
	\$
Total	\$
Bond Forfeited	\$
Balance Due	

HOW TO GET A MONEY JUDGMENT IN SMALL CLAIMS COURT

Form DC 84

AFFIDAVIT AND CLAIM, SMALL CLAIMS

Use this form if you want to bring a lawsuit against someone who owes you money or who has caused damage to your property or possessions and you cannot resolve the dispute through mediation or other means. If your damage is the result of an intentional wrongdoing, such as fraud, libel, slander, malicious destruction of property, or assault and battery, you cannot bring your action in the small claims division of the district court unless the wrongdoing is for a dishonored check, consumer protection violation, or recreational trespass.

You cannot use the small claims division of the district court if:

- 1) your case is against the State of Michigan or a state agency,
- 2) your case is against a local governmental unit that involves issues of governmental immunity,
- 3) you are an assignee or third-party beneficiary of the obligation, or
- 4) you have filed more than five small claims cases in the same week.

The maximum you can collect through a judgment in the small claims division of the district court is \$5,500. If your claim is for more than \$5,500, you can still use the small claims division but your judgment award cannot exceed \$5,500 and you permanently waive the right to collect the rest of your claim.

CLAIM CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

1. Fill out all requested information on the form? YES
2. Make all necessary copies of the form? YES
3. File the form and filing fee with the clerk of the court? YES
4. Have the form served on the defendant? YES
5. Keep one copy of the form for yourself? YES

If you cannot answer "yes" to all the above steps, a trial on your claim may be delayed or your claim may be dismissed.

By using this form packet you are representing yourself or an employer, a business, or other organization in a small claims court action. In order to receive the action you seek, you must follow the instructions in this packet. If you fail to do even one of the required steps, the court may not be able to give you the result you want.

If you have questions about any step in the process, refer to pages 3 through 5 of this booklet for details.

INSTRUCTIONS FOR USING FORM DC 84 FILING AND SERVING A CLAIM

»» WHO CAN FILE A CLAIM

An affidavit and claim can be signed and filed by someone other than the plaintiff. The plaintiff can be yourself if you are suing as an individual or a sole proprietor (sole owner of a business). **If you are not the plaintiff, but you are filing the claim** for a sole proprietorship (a business owned by one person), corporation, or other organization, you must meet the following conditions:

- If you are filing for an individual and you are not that individual, you must be the individual's guardian, conservator, or next friend.
- If you are filing for a sole proprietor (sole owner of a business) and you are not the owner, you must be a full-time salaried employee of the sole proprietor and you must have knowledge of the facts in the claim.
- If you are filing for a partnership, you must be one of the partners or you must be a full-time salaried employee of the partnership and you must have knowledge of the facts in the claim.
- If you are filing for a corporation, you must be a full-time salaried employee of the corporation and you must have knowledge of the facts in the claim.
- If you are filing for a county, city, village, township, or local or intermediate school district, you must be an elected or appointed officer or employee of the county, city, village, township, or local or intermediate school district who has knowledge of the facts surrounding the claim and who is authorized by the governing body of the county, city, village, township, or local or intermediate school district to file the claim.

»» FILING A CLAIM

1. Can I have an attorney?

If you decide to file a claim in the small claims division of the district court, an attorney cannot represent you. However, if the defendant wants an attorney, the defendant can demand that the claim be removed to the general civil division of the district court.

2. What does it cost?

The fee for filing a claim in the small claims division of the district court is:

\$30 for damage claims up to \$600 (\$25 filing fee + \$5 electronic filing system fee)

\$50 for damage claims from \$600 to \$1,750 (\$45 filing fee + \$5 electronic filing system fee)

\$70 for damage claims over \$1,750 to \$5,500 (\$65 filing fee + \$5 electronic filing system fee)

The plaintiff is responsible for paying the filing fee and other fees. If the judge rules in favor of the plaintiff, these fees may be added to the judgment amount against the defendant.

3. Signing the affidavit and claim under oath.

The affidavit and claim form must be signed under oath in front of a notary public (you can find one at a bank) or the clerk of the court. The person signing the form must show photo identification to the notary public or clerk of the court before signing the affidavit and claim. The form can only be signed by the person who can file a claim, as stated above, under **Who Can File a Claim**.

Before you complete the form, you should decide whether you want to sign the affidavit and claim in front of a notary public or in front of the clerk of the court. If you decide to sign the affidavit and claim in front of a notary public, you only need to print out one copy of the form after completing it.

You can make three additional copies afterward. If you go to the court in person, print all four copies of the form after completing it.

4. Fill out the affidavit and claim form.

Fill out form DC 84 (Affidavit and Claim, Small Claims) on the website or get a paper copy of the form from the court to fill out. Follow the instructions on page 6. After completing form DC 84, print out the number of copies you need (see Step 3 on pages 3 and 4).

5. File the affidavit and claim with the court and make arrangements for service.

You can file the affidavit and claim with the court in person or by mail. You must pay the filing fees at the same time you file the affidavit and claim. If you can't afford to pay the filing fee, ask the clerk of the court for an Affidavit and Order, Suspension of Fees/Costs (form MC 20, which is not included in this packet) to fill out. Service fees can cost as little as \$5 for certified mail or as much as \$21 plus mileage for personal service for each defendant.

When the filing is received, the clerk will record the filing of the claim, assign a case number, and write the name of the district court judge or district court attorney magistrate assigned to the case on all copies of the affidavit and claim form. The clerk will complete the notice of hearing.

The clerk will keep the original of the affidavit and claim for the court file, and will make arrangements to serve one copy on each defendant as you have instructed and paid, either by personal delivery or by certified mail, return receipt requested and deliverable to the addressee only. After serving the claim, the clerk will return the remaining copy of the form to you.

To file with the court in person, take all four copies of the form that you made in Step 4 to the clerk of the court in the proper district court (see MCL 600.8415 for details). Bring your photo identification and your payment for the filing fee with you. Sign the affidavit and claim in front of the clerk of the court.

To file with the court by mail, you need to decide how you want to have the affidavit and claim served on each defendant because you will need to include payment for service when you mail your claim to the court. Contact the court to find out what it will cost. Place all four copies of the signed and notarized affidavit and claim form, payment for the filing fee, payment for service, and one self-addressed postage-paid envelope in an envelope addressed to the proper district court (see MCL 600.8415 for details). Have the post office mail the package to the court.

6. Filing proof of service with the court.

After the affidavit and claim is served on the defendant by the process server, the process server will complete the proof of service and file it with the court. If the court serves the affidavit and claim by certified mail, the clerk of the court will complete the proof of service.

If the process server is unable to serve the affidavit and claim on a defendant by personal service, the process server may serve the form by one of the other methods stated in Michigan Court Rule 2.105. It may be necessary for the court to reschedule the appearance date if it appears a defendant will not receive notice at least 7 days before the appearance date. See MCR 4.303(C) and MCL 600.8406.

7. Prepare for the trial.

To prepare for the trial, gather the evidence you need to prove your case. A letter or affidavit from a witness will be accepted as evidence by the court without the witness being physically present at the trial, but it is better if you have the witness come to court. If a witness is unwilling to appear, you can ask the clerk of the court to issue an order to appear (subpoena), requiring the witness to appear at the trial. The order to appear must be served on the witness (along with any witness fee) no later than two days before the trial. You can pay the clerk of the court to make arrangements for service of this order.

»» INFORMATION ABOUT ATTENDING THE HEARING

Bring your copy of the affidavit and claim with you to the hearing. Also, bring with you all the evidence you gathered and witnesses who are willing to testify. If you received a written answer or counterclaim from the defendant, bring that also. The trial will usually take place at the location stated in the notice to appear. It is important for you to arrive at the court on time. If you file a claim and are not in court when your case is called, the case will probably be dismissed.

1. You are expected to conduct yourself in a courteous manner and to follow the court's directions.
2. Make a list of information you think is important for the district court judge or district court attorney magistrate to know. You can use this list as a reminder to bring up the points you think are important.
3. If you need someone to attend this hearing who is unwilling to attend, follow the procedure in Michigan Court Rule 2.506 to get an order to appear (subpoena) or consult an attorney.
4. Go to the courtroom on the scheduled day and time. Dress neatly. Arrive 10 or 15 minutes early. Bring your witnesses with you.
5. Go into the courtroom, take a seat, and wait for your case to be called. Do not interrupt any hearing in progress.
6. The court clerk will call the case and you will appear before the district court judge or district court attorney magistrate to prove your case. Witnesses will be allowed to tell the court about facts that support your evidence.
7. When you are called, go to the front of the courtroom and follow the directions of the district court judge or district court attorney magistrate.
8. After making a decision, the court will prepare an appropriate judgment and the district court judge or district court attorney magistrate will instruct you about what to do next.

»» COLLECTING A MONEY JUDGMENT

If the court enters a money judgment in your favor and it is not paid when ordered, additional papers must be filed with the court to collect on the judgment by having wages or a bank account garnished or property seized. This cannot occur until 21 days after the judgment is entered. The court may ask that information be provided for these collection efforts. See <http://courts.mi.gov/self-help/center/collect/pages/default.aspx> for details.

INSTRUCTIONS FOR COMPLETING "AFFIDAVIT AND CLAIM, SMALL CLAIMS"

Please print neatly.

Items 1 through 12 must be completed before your claim can be filed with the court. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- ① ② Write in the names, addresses, and telephone numbers of the plaintiff and the defendant. The plaintiff is the name of the person suing and may be someone other than you. If the plaintiff is a business, specify both the legal name and any assumed name in which the business is being conducted. The defendant is the person being sued. If you are suing a business, state its legal name if you know it. If you do not know its legal name, state the name the business was using to conduct business. If there is more than one defendant, write the words "et al." after the name of the defendant and write the additional names and addresses on a separate sheet of paper.
- ③ Check the box that is true. If another civil case was filed that involved the plaintiff and defendant regarding the same problem stated in this claim, write the name of the court where the case was filed, the case number, and the name of the judge assigned to hear that case. Check the box whether that case is or is not still pending.
- ④ A person other than the plaintiff can complete and sign this form. Read page 3 and then check the box that best describes your relationship to the plaintiff. If you are the plaintiff, check the box "plaintiff." If you are a partner and you are suing for the partnership, check the box "a partner." If you are a full-time employee of the plaintiff and are suing for the plaintiff, check the box "a full-time employee of the plaintiff."
- ⑤ The plaintiff can be either: 1) an individual, 2) a partnership, 3) a corporation, 4) a sole proprietor (a private business owner without a partner), or (5) an other organization. Check the box that best describes the plaintiff, and if applicable, complete the blank for "other."
- ⑥ The defendant can be either: 1) an individual, 2) a partner in a business partnership, 3) a corporation, 4) a sole proprietor (a private business owner without a partner), or 5) other organization. Check the box that best describes the defendant, and if applicable, complete the blank for "other." If there is more than one defendant, you will need to provide this information for each defendant.
- ⑦ Write in the date that the dispute occurred. For example, if the defendant owed money on a certain date and did not pay on that date, print that date here. Or, if the defendant damaged something that belonged to you, print the date that the damage occurred.
- ⑧ Write in the amount of the money owed or that you believe is owed to cover any damage even if it is more than \$5,500. If the amount is more than \$5,500 and the case is decided in the small claims division of the district court, the plaintiff gives up the right to any amount over \$5,500. The plaintiff cannot file another form to get a judgment for the balance. If the plaintiff wants a judgment for an amount over \$5,500 and the claim is for \$25,000 or less, a lawsuit must be filed in the civil division of the district court.
- ⑨ Briefly explain the reasons for the claim. Include what happened to cause the dispute.
- ⑩ Make sure that you understand and agree with this statement.
- ⑪ Check the boxes that are most accurate.
- ⑫ Check the box that is most accurate.

DO NOT SIGN YOUR NAME until you are standing in front of a notary or the clerk of the court.

DO NOT WRITE IN THE SECTION AFTER ITEM 12. The notary public or clerk of the court will complete this section.

File your affidavit and claim with the court. The clerk of the court will enter the expiration date and complete the notice of hearing. See page 4 of this packet for details.

- Read pages 3 through 5 of this booklet for details on filing and serving this form.

You must read this booklet for directions on the legal process.

STATE OF MICHIGAN JUDICIAL DISTRICT	AFFIDAVIT AND CLAIM Small Claims	CASE NO.
--	---	-----------------

Court address _____

Court telephone no. _____

See additional notice and instructions on the back of plaintiff and defendant copies.

1. _____
Plaintiff

Address

City, state, zip Telephone no. _____

2. _____
Defendant

Address

City, state, zip Telephone no. _____

NOTICE OF HEARING	
For Court Use Only	
The plaintiff and the defendant must be in court on	
Day _____	Date _____
at _____ at <input type="checkbox"/> the court address above.	
Time _____	
<input type="checkbox"/> _____ .	
Location _____	
Process server's name _____	Fee paid: \$ _____

3. A civil action between these parties or other parties arising out of the transaction or occurrence alleged in this complaint has been previously filed in _____ Court. The case number, if known, is _____ .
The action remains is no longer pending.

4. I have knowledge or belief about all the facts stated in this affidavit and I am
 the plaintiff or his/her guardian, conservator, or next friend. a partner. a full-time employee of the plaintiff.

5. The plaintiff is an individual. a partnership. a corporation. a sole proprietor. _____
Other

6. The defendant is an individual. a partnership. a corporation. a sole proprietor. _____
Other

7. The date(s) the claim arose is/are _____ .
Attach separate sheets if necessary

8. Amount of money claimed is \$ _____ . (NOTE: Plaintiff's costs are determined by the court and awarded as appropriate. They are not part of the amount claimed.)

9. The reasons for the claim are: _____

10. The plaintiff understands and accepts that the claim is limited to \$5,500 by law and that the plaintiff gives up the rights to (a) recover more than this limit, (b) an attorney, (c) a jury trial, and (d) appeal the judge's decision.

11. I believe the defendant is is not mentally competent. I believe the defendant is is not 18 years or older.

12. I do not know whether the defendant is in the military service. The defendant is not in the military service.
 The defendant is in the military service.

Signature

Subscribed and sworn to before me on _____, _____ County, Michigan.

My commission expires: _____ Date Signature: _____
Deputy clerk/Notary public

Notary public, State of Michigan, County of _____

The defendant(s) must be served by _____ .
Expiration date

PROOF OF SERVICE

**AFFIDAVIT AND CLAIM
Small Claims**
Case No. _____

TO PROCESS SERVER: You are to serve this affidavit and claim no later than 7 days before the hearing date. You must make and file your return with the court clerk. If you are unable to complete service, you must return this original and all copies to the court clerk.

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE

<input type="checkbox"/> OFFICER CERTIFICATE I certify that I am a sheriff, deputy sheriff, bailiff, or appointed court officer (MCR 2.104[A][2]), and that: (notarization not required)	OR	<input type="checkbox"/> AFFIDAVIT OF PROCESS SERVER Being first duly sworn, I state that I am a legally competent adult who is not a party or an officer of a corporate party, and that: (notarization required)
--	-----------	---

- I served personally a copy of the affidavit and claim,
- I served by registered or certified mail (copy of return receipt attached) a copy of the affidavit and claim,
- together with _____, on the defendant(s):
Attachment _____

Defendant name	Complete address of service	Day, date, time
Defendant name	Complete address of service	Day, date, time
Defendant name	Complete address of service	Day, date, time

- I have personally attempted to serve the affidavit and claim, together with any attachments on the following defendant(s) and have been unable to complete service.

Defendant name	Complete address of service	Day, date, time
Defendant name	Complete address of service	Day, date, time
Defendant name	Complete address of service	Day, date, time

I declare that that statements above are true to the best of my information, knowledge, and belief.

Service fee	Miles traveled	Fee	
\$		\$	
Incorrect address fee	Miles traveled	Fee	TOTAL FEE
\$		\$	\$

Signature _____

Name (type or print) _____

Title _____

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Deputy court clerk/Notary public

Notary public, State of Michigan, County of _____

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received service of the affidavit and claim, together with _____
Attachment

_____ on _____
Day, date, time

_____ on behalf of _____
Signature

ADDITIONAL NOTICE AND INSTRUCTIONS

TO BOTH THE PLAINTIFF AND THE DEFENDANT:

- You must bring to the hearing all witnesses, books, papers, and other physical evidence needed to prove or disprove this claim.
- Before the trial (hearing) starts, you have the right to
 1. **remove the case to the general civil division of the district court, or**
 2. have the case heard by a district court judge (if the hearing is scheduled before an attorney magistrate). If the case is heard by an attorney magistrate, you may appeal to the district judge within 7 days after the trial.
- If the case is tried in the small claims division, you give up the right to an attorney, to a jury trial, and to appeal the judge's decision.

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

TO THE DEFENDANT:

- The affidavit and claim you have just received means you are being sued in the small claims division of the district court.
- The court is being asked to decide a matter that the plaintiff says is your obligation and responsibility.
- If you wish to deny this claim or arrange terms of payment, you must make your request by appearing at the date, time, and place stated in the notice of hearing on the front of this form.
- If you do not appear at the date, time, and place stated, a default judgment may be entered against you for the amount stated in item 8, including the costs of this action.
- If the dispute is settled before or at the hearing, you may have to pay the plaintiff's costs.
- In case a judgment is entered against you at the hearing, you should be prepared to pay the amount stated in item 8, including the costs of this action, or to make arrangements for installment payments.

**STATE OF MICHIGAN
JUDICIAL DISTRICT**

**DEMAND AND ORDER FOR REMOVAL
Small Claims**

CASE NO.

- SC

- GC

Court address

Court telephone no.

Plaintiff's name, address, and telephone no.

v

Personal service

Defendant's name, address, and telephone no.

Personal service

This demand is made by plaintiff. plaintiff's attorney. defendant. defendant's attorney.

DEMAND

I demand that this case be removed from the small claims division to the general civil division of the court.

Date

Attorney's name, address, and telephone no. (party demanding removal)

Signature of party demanding removal

Name (type or print)

Address

City, state, zip Telephone no.

ORDER

IT IS ORDERED: This case is removed to the general civil division of the court for further proceedings. **The defendant has 14 days from the date of this order to file a written answer and serve it on the other party or take other lawful action with the court. If the defendant does not answer or take other action within the time allowed, judgment may be entered for the relief demanded in the complaint.**

Date

Judge/Attorney magistrate Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this demand and order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Court clerk

Form DC 100a

DEMAND FOR POSSESSION NONPAYMENT OF RENT

Use this form to give notice to a tenant when you want to start eviction proceedings against a tenant who has not paid rent.

NOTICE CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .



1. Complete the notice form? YES
2. Sign the notice form? YES
3. Deliver the "Tenant's copy" of the notice to the tenant? YES
4. Keep the "Court copy" of the notice for yourself? YES

If you cannot answer "yes" to all the above steps, you may have problems in your court case if you file a complaint with the court to evict a tenant.

If you have questions about any step in the process, refer to page 3 of this booklet for details. 

**INSTRUCTIONS FOR USING FORM DC 100a
COMPLETING AND DELIVERING A DEMAND FOR POSSESSION**

»» DEFINITION

Demand for Possession, Nonpayment of Rent

A demand for possession for nonpayment of rent is used when a tenant has not paid the rent and the landlord wants the tenant to either pay the rent or move out or vacate the premises.

»» PREPARING THE NOTICE

Complete the form using the instructions on page 4.

»» GETTING NOTICE TO THE TENANT

1. Serving (Delivering) the Notice

You must "serve" the "Tenant's copy" of the demand for possession on the tenant. This can be done in one of three ways.

- delivering it personally to the tenant,
- delivering it on the premises to a member of the tenant's family or household, or an employee of the tenant, who is capable of understanding your instruction to deliver it to the tenant, with a request that it be delivered to the tenant, or
- sending it first-class mail addressed to the tenant at his or her last known address.

Some examples of improper service are slipping the demand under the tenant's door, leaving the demand outside the tenant's door, attaching the demand to the property, or mailing the demand by methods that require a signature.

2. Complete the Certificate of Service

Complete the Certificate of Service on the "Court copy" of the demand for possession using the instructions on page 4. This copy is for your records. Keep it in a safe place because you may need it later if you have to file a complaint for eviction with the court.

INSTRUCTIONS FOR COMPLETING "DEMAND FOR POSSESSION, NONPAYMENT OF RENT"

Please print neatly. After filling in the form, you will need to print both copies of the form.

Items A through E must be completed before delivering your notice to the tenant. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Write in the name of the tenant and the address where you will be delivering the notice. This address may be where the tenant lives or does business and it may be different than the address of the rental property.
- B** Write your name in the line that says "Name (type or print)."
- C** Write in the amount of the rent owed.
- D** Write in the box the complete address or a complete description of the rental property if different than the mailing address in **A** above. If this address is the same as the mailing address, write in the box "Same as mailing address."
- E** Write in the date, sign your name, and write in your address and telephone number.

Deliver the Tenant's copy to the tenant.

Read page 3 of this packet for details on delivering this notice to the tenant.

- F** On the date you deliver the notice, write in the date. Write in the name of the person to whom you delivered the notice. Check the box in front of the statement that best describes how you delivered the notice. Sign your name.

You should read this booklet for directions on the legal process.

Form DC 100b

DEMAND FOR POSSESSION DAMAGE/HEALTH HAZARD TO PROPERTY

Use this form to give notice to a tenant when you want to start eviction proceedings against a tenant who has caused:

- **extensive and continuing damage to the rental property, or**
- **a serious and continuing health hazard to the rental property.**

NOTICE CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

- | | | |
|----|---|------------------------------|
| 1. | Make sure that 90 days has not passed since you discovered the health hazard or damage to the property? | YES <input type="checkbox"/> |
| 2. | Complete the notice form? | YES <input type="checkbox"/> |
| 3. | Sign the notice form? | YES <input type="checkbox"/> |
| 4. | Deliver the "Tenant's copy" of the notice to the tenant? | YES <input type="checkbox"/> |
| 5. | Keep the "Court copy" of the notice for yourself? | YES <input type="checkbox"/> |

If you cannot answer "yes" to all the above steps, you may have problems in your court case if you file a complaint with the court to evict the tenant.

If you have questions about any step in the process, refer to page 3 of this booklet for details.

**INSTRUCTIONS FOR USING FORM DC 100b
COMPLETING AND DELIVERING A DEMAND FOR POSSESSION**

»» DEFINITION

Demand for Possession, Damage/Health Hazard to Property

A "notice to quit" is a notice given to a tenant to do some required act or to surrender and vacate the rental property by a certain date. This particular "notice to quit" is a demand for possession that is used when the tenant has caused extensive and continuing damage or a serious and continuing health hazard to the rental property and the landlord wants the tenant to either remove the health hazard, repair the damage, or move out. This notice must be given within 90 days of discovering the damage or health hazard.

»» PREPARING THE NOTICE

Complete the form using the instructions on page 4.

»» GETTING NOTICE TO THE TENANT

1. Serving (Delivering) the Notice

You must "serve" the "Tenant's copy" of the demand for possession on the tenant. This can be done in one of three ways.

- delivering it personally to the tenant,
- delivering it on the premises to a member of the tenant's family or household, or an employee of the tenant, who is capable of understanding your instruction to deliver it to the tenant, with a request that it be delivered to the tenant, or
- sending it first-class mail addressed to the tenant at his or her last known address.

Some examples of improper service are slipping the demand under the tenant's door, leaving the demand outside the tenant's door, attaching the demand to the property, or mailing the demand by methods that require a signature.

2. Complete the Certificate of Service

Complete the Certificate of Service on the "Court copy" of the demand for possession using the instructions on page 4. This copy is for your records. Keep it in a safe place because you may need it later if you have to file a complaint for eviction with the court.

INSTRUCTIONS FOR COMPLETING "DEMAND FOR POSSESSION, DAMAGE/HEALTH HAZARD TO PROPERTY"

Please print neatly. After filling in the form, you will need to print both copies of the form.

Items A through E must be completed before delivering your notice to the tenant. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Write in the name of the tenant and the address where you will be delivering the notice. This address may be where the tenant lives or does business and it may be different than the address of the rental property.
- B** Write your name in the line that says "Name (type or print)."
- C** Check the box that best describes the reason for giving the tenant a demand for possession, and then write in the box the complete address or a complete description of the rental property if different than the mailing address in **A** above. If this address is the same as the mailing address, write in the box "Same as mailing address."
- D** Explain in detail the serious and continuing health hazard or the extensive and ongoing damage to the rental property in the lines provided.
- E** Write in the date, sign your name, and write in your address and telephone number.

Deliver the Tenant's copy to the tenant.

Read page 3 of this packet for details on delivering this notice to the tenant.

- F** On the date you deliver the notice, write in the date. Write in the name of the person to whom you delivered the notice. Check the box in front of the statement that best describes how you delivered the notice. Sign your name.

You should read this booklet for directions on the legal process.



STATE OF MICHIGAN	DEMAND FOR POSSESSION DAMAGE/HEALTH HAZARD TO PROPERTY Landlord-Tenant	
--------------------------	---	--

(A)

TO: _____

(B)

1. Your landlord/landlady, _____, says you have willfully or negligently caused
Name (type or print)

(C)

- extensive and continuing damage to the property at:
- a serious and continuing health hazard to exist at:

Address or description of premises rented (if different from mailing address)

(D)

Explanation: _____

2. You must do one of the following within 7 days from the date this notice was served.

- a. Repair the damage and/or remove the health hazard.
- b. Move out.

If you do not do one of the above, your landlord/landlady may take you to court to evict you from the property.

3. If you believe you are not at fault, you can have a lawyer advise you. Call him or her soon.

(E)

Date

Signature of owner of premises or agent

Address

City, state, zip

Telephone no.

(F)

CERTIFICATE OF SERVICE

I certify that on _____ I served this notice on _____
Date Name

- by
- delivering it personally to the person in possession of the property.
 - delivering it on the premises to a member of his/her family or household or an employee of suitable age and discretion with a request that it be delivered to the person in possession of the property.
 - first-class mail addressed to the person in possession of the property.

Signature

STATE OF MICHIGAN	DEMAND FOR POSSESSION DAMAGE/HEALTH HAZARD TO PROPERTY Landlord-Tenant	
--------------------------	---	--

TO:

1. Your landlord/landlady, _____, says you have willfully or negligently caused

- extensive and continuing damage to the property at:
- a serious and continuing health hazard to exist at:

Address or description of premises rented (if different from mailing address)

Explanation: _____

2. You must do one of the following within 7 days from the date this notice was served.
- a. Repair the damage and/or remove the health hazard.
 - b. Move out.
- If you do not do one of the above, your landlord/landlady may take you to court to evict you.
3. If you believe you are not at fault, you can have a lawyer advise you. Call him or her soon.

Date

Signature of owner of premises or agent

Address

City, state, zip

Telephone no.

HOW TO GET LEGAL HELP

1. Call your own lawyer.
2. If you do not have an attorney but have money to retain one, you may locate an attorney through the State Bar of Michigan Lawyer Referral Service at 1-800-968-0738 or through a local lawyer referral service. Lawyer referral services should be listed in the yellow pages of your telephone directory or you can find a local lawyer referral service at www.michbar.org.
3. If you do not have an attorney and cannot pay for legal help, you may qualify for assistance through a local legal aid office. Legal aid offices should be listed in the yellow pages of your telephone directory or you can find a local legal aid office at www.michiganlegalhelp.org. If you do not have Internet access at home, you can access the Internet at your local library.

Form DC 100d

DEMAND FOR POSSESSION TERMINATION OF TENANCY Mobile Home Park-Mobile Home Owner (Just-Cause Termination)

Use this form to give notice to a tenant when you want to start eviction proceedings against a mobile home owner when terminating tenancy in a mobile home park.

NOTICE CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

[Redacted]

1. Complete the notice form? YES
2. Sign the notice form? YES
3. Deliver the "Tenant's copy" of the notice to the tenant? YES
4. Keep the "Court copy" of the notice for yourself? YES

If you cannot answer "yes" to all the above steps, you may have problems in your court case if you file a complaint with the court to evict the tenant.

If you have questions about any step in the process, refer to page 3 of this booklet for details. **[Redacted]**

**INSTRUCTIONS FOR USING FORM DC 100d
COMPLETING AND DELIVERING A DEMAND FOR POSSESSION**

»» DEFINITION

**Demand for Possession, Termination of Tenancy, Mobile Home Park-Mobile Home Owner,
Just-Cause **Termination****

A "notice to quit" is a notice given to a tenant to do some required act or to surrender and vacate the rental property by a certain date. This particular notice to quit is a demand for possession that is used when the landlord wants to terminate the tenancy of a mobile home owner in a mobile home park and wants the tenant to move.

»» PREPARING THE NOTICE

Complete the form using the instructions on page 4.

»» GETTING NOTICE TO THE TENANT

1. Serving (Delivering) the Notice

You must "serve" the "Tenant's copy" of the demand for possession on the tenant. This can be done in one of three ways.

- delivering it personally to the tenant,
- delivering it on the premises to a member of the tenant's family or household, or an employee of the tenant, who is capable of understanding your instruction to deliver it to the tenant, with a request that it be delivered to the tenant, or
- sending it first-class mail addressed to the tenant at his or her last known address.

Some examples of improper service are slipping the demand under the tenant's door, leaving the demand outside the tenant's door, attaching the demand to the property, or mailing the demand by methods that require a signature.

2. Complete the Certificate of Service

Complete the Certificate of Service on the "Court copy" of the demand for possession using the instructions on page 4. This copy is for your records. Keep it in a safe place because you may need it later if you have to file a complaint for eviction with the court.

**INSTRUCTIONS FOR COMPLETING "DEMAND FOR POSSESSION, TERMINATION OF TENANCY,
MOBILE HOME PARK-MOBILE HOME OWNER (Just-Cause Termination)"**

Please print neatly. After filling in the form, you will need to print both copies of the form.

Items A through F must be completed before delivering your notice to the tenant. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Write in the name of the tenant and the address where you will be delivering the notice. This address may be where the tenant lives or does business and it may be different than the address of the rental property.
- B** Write your name in the line that says "Name (type or print)."
- C** Write in the box the complete address or a complete description of the rental property if different than the mailing address in **A** above. If this address is the same as the mailing address, write in the box "Same as mailing address."
- D** Explain the reason for wanting to evict the tenant.
- E** Write in the date the tenant must move by.
- F** Write in the date, sign your name, and write in your address and telephone number.

Deliver the Tenant's copy to the tenant.

Read page 3 of this packet for details on delivering this notice to the tenant.

- G** On the date you deliver the notice, write in the date. Write in the name of the person to whom you delivered the notice. Check the box in front of the statement that best describes how you delivered the notice. Sign your name.

You should read this booklet for directions on the legal process.

STATE OF MICHIGAN	DEMAND FOR POSSESSION TERMINATION OF TENANCY Mobile Home Park-Mobile Home Owner Just-Cause Termination	
--------------------------	---	--

TO:

1. The owner/operator, , of your mobile home park is terminating your tenancy for just cause as stated below and wants to evict you from

Address or description of premises rented (if different from mailing address)

State reason(s) for terminating tenancy for just cause. See reverse side for acceptable reasons.

2. You must move by _____ or the owner/operator may take you to court to evict you.
Date (*see note)

3. If the owner/operator takes you to court to evict you, you will have the opportunity to present reasons why you believe you should not be evicted. You also have 10 days from the date of this notice to request, by certified or registered mail to the owner/operator, an in-person conference with the owner/operator. You may have a lawyer with you at this conference. You are required by law to continue paying rent and other charges.

4. If you believe you have a good reason why you should not be evicted, you may have a lawyer advise you. Call him or her soon.

Date

Signature of owner/operator

Address

City, state, zip Telephone no.

*NOTE: If the lease agreement does not state otherwise, the owner/operator must give notice equal in time to at least one rental period.

CERTIFICATE OF SERVICE

I certify that on _____ I served this notice on _____
Date Name

- by
- delivering it personally to the person in possession.
 - delivering it on the premises to a member of his/her family or household or an employee of suitable age and discretion with a request that it be delivered to the person in possession.
 - first-class mail addressed to the person in possession.

Signature

Court copy (to be copied, if necessary, to attach to the complaint)

STATE OF MICHIGAN	DEMAND FOR POSSESSION TERMINATION OF TENANCY Mobile Home Park-Mobile Home Owner Just-Cause Termination	
--------------------------	---	--

TO: _____

1. The owner/operator, _____, of your mobile home park is terminating your tenancy for just cause as stated below and wants to evict you from

Name (type or print)

Address or description of premises rented (if different from mailing address)

State reason(s) for terminating tenancy for just cause. See reverse side for acceptable reasons.

- You must move by _____ or the owner/operator may take you to court to evict you.
Date (*see note)
- If the owner/operator takes you to court to evict you, you will have the opportunity to present reasons why you believe you should not be evicted. You also have 10 days from the date of this notice to request, by certified or registered mail to the owner/operator, an in-person conference with the owner/operator. You may have a lawyer with you at this conference. You are required by law to continue paying rent and other charges.
- If you believe you have a good reason why you should not be evicted, you may have a lawyer advise you. Call him or her soon.

Date

Signature of owner/operator

Address

_____ Telephone no.

City, state, zip

*NOTE: If the lease agreement does not state otherwise, the owner/operator must give notice equal in time to at least one rental period.

HOW TO GET LEGAL HELP

- Call your own lawyer.
- If you do not have an attorney but have money to retain one, you may locate an attorney through the State Bar of Michigan Lawyer Referral Service at 1-800-968-0738 or through a local lawyer referral service. Lawyer referral services should be listed in the yellow pages of your telephone directory or you can find a local lawyer referral service at www.michbar.org.
- If you do not have an attorney and cannot pay for legal help, you may qualify for assistance through a local legal aid office. Legal aid offices should be listed in the yellow pages of your telephone directory or you can find a local legal aid office at www.michiganlegalhelp.org. If you do not have Internet access at home, you can access the Internet at your local library.

Mobile home owner's copy

**EXPLANATION OF JUST-CAUSE TERMINATIONS
FOR MOBILE HOME OWNERS RENTING LAND IN MOBILE HOME PARKS**

MCL 600.5775(2)

- (a) Use of site for unlawful purpose.
- (b) Failure by the tenant to comply with a lease or agreement of the park or with a rule or regulation of the mobile home park adopted under the lease or agreement, which rule or regulation is reasonably related to
 - (i) the health, safety, or welfare of the park, its employees, or tenants.
 - (ii) the quiet enjoyment of the other tenants of the mobile home park.
 - (iii) maintaining the physical condition or appearance of the mobile home park or the mobile homes on site.
- (c) A violation by the tenant of rules of the **Michigan Department of Health and Human Services (MDHHS)**.
- (d) Intentional physical injury by the tenant to the personnel or other tenants of the mobile home park, or intentional physical damage by the tenant to the property of the mobile home park or of its other tenants.
- (e) Failure of the tenant to comply with a local ordinance, state law, or governmental rule or regulation relating to mobile homes.
- (f) Failure of the tenant to pay rent or other charges under the lease or rental agreement on time on three or more occasions during any 12-month period, for which the owner or operator has served a written demand for possession for nonpayment of rent and the tenant has failed or refused to pay the rent or other charges within the time period stated in the written demand for possession.
- (g) Conduct by the tenant upon the mobile home park premises, which is a substantial annoyance to other tenants or to the mobile home park, after notice and an opportunity to cure.
- (h) Failure of the tenant to maintain the mobile home or mobile home site in a reasonable condition consistent with aesthetics appropriate to the park.
- (i) Condemnation of the mobile home park.
- (j) Changes in the use or substantive nature of the mobile home park.
- (k) Public health and safety violations by the tenant.

Form DC 100e

DEMAND FOR POSSESSION TERMINATION OF TENANCY DUE TO UNLAWFUL DRUG ACTIVITY ON PREMISES

Use this form to give notice to a tenant when you want to start eviction proceedings against a tenant for unlawful drug activity on premises.

NOTICE CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

- 1. Make sure your lease contains a clause providing for termination of tenancy for illegal drug activity on the premises? If it does not, you cannot evict for unlawful drug activity on the premises. YES
- 2. Make sure a police report was filed alleging that the tenant or some other person under the tenant's control has unlawfully manufactured, delivered, or possessed illegal drugs on the leased premises? If not, you cannot evict for unlawful drug activity on the premises. YES
- 3. Complete the notice form? YES
- 4. Sign the notice form? YES
- 5. Deliver the "Tenant's copy" of the notice to the tenant? YES
- 6. Keep the "Court copy" of the notice for yourself? YES

If you cannot answer "yes" to all the above steps, you may have problems in your court case if you file a complaint with the court to evict the tenant.

If you have questions about any step in the process, refer to page 3 of this booklet for details.

**INSTRUCTIONS FOR USING FORM DC 100e
COMPLETING AND DELIVERING A DEMAND FOR POSSESSION**

»» DEFINITION

Demand for Possession, Termination of Tenancy Due to Unlawful Drug Activity on Premises

This particular demand for possession is used when the landlord has terminated the tenancy and wants the tenant to move out or vacate the premises because of unlawful drug activity on the rental property. This form can only be used if a formal police report has been filed alleging unlawful drug activity on the leased premises.

»» PREPARING THE NOTICE

Complete the form using the instructions on page 4.

»» GETTING NOTICE TO THE TENANT

1. Serving (Delivering) the Notice

You must "serve" the "Tenant's copy" of the demand for possession on the tenant. This can be done in one of three ways.

- delivering it personally to the tenant,
- delivering it on the premises to a member of the tenant's family or household, or an employee of the tenant, who is capable of understanding your instruction to deliver it to the tenant, with a request that it be delivered to the tenant, or
- sending it first-class mail addressed to the tenant at his or her last known address.

Some examples of improper service are slipping the demand under the tenant's door, leaving the demand outside the tenant's door, attaching the demand to the property, or mailing the demand by methods that require a signature.

2. Complete the Certificate of Service

Complete the Certificate of Service on the "Court copy" of the demand for possession using the instructions on page 4. This copy is for your records. Keep it in a safe place because you may need it later if you have to file a complaint for eviction with the court.

INSTRUCTIONS FOR COMPLETING "DEMAND FOR POSSESSION, TERMINATION OF TENANCY DUE TO UNLAWFUL DRUG ACTIVITY ON PREMISES"

Please print neatly. After filling in the form, you will need to print both copies of the form.

Items A through E must be completed before delivering your demand to the tenant. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Write in the name of the tenant and the address where you will be delivering the demand. This address may be where the tenant lives or does business and it may be different than the address of the rental property.
- B** Write your name in the line that says "Name (type or print)."
- C** Write in the box the complete address or a complete description of the rental property if different than the mailing address in **A** above. If this address is the same as the mailing address, write in the box "Same as mailing address."
- D** Write in the date, sign your name, and write in your address and telephone number.

Deliver the Tenant's copy to the tenant.

Read page 3 of this packet for details on delivering this notice to the tenant.

- E** On the date you deliver the demand, write in the date. Write in the name of the person to whom you delivered the demand. Check the box in front of the statement that best describes how you delivered the demand. Sign your name.

You should read this booklet for directions on the legal process.

STATE OF MICHIGAN	DEMAND FOR POSSESSION TERMINATION OF TENANCY DUE TO UNLAWFUL DRUG ACTIVITY ON PREMISES Landlord-Tenant	
--------------------------	---	--

A

TO:

B

1. Your landlord/landlady, _____, is terminating your tenancy and wants to evict you from:

C

Address or description of premises rented (if different from mailing address)

because you have willfully or negligently caused unlawful drug activity at the leased premises.

2. You must move within 24 hours from the date this notice was served or your landlord/landlady may take you to court to evict you.
3. If your landlord/landlady takes you to court to evict you, you will have the opportunity to present reasons why you believe you should not be evicted.
4. If you believe you have a good reason why you should not be evicted, you may have a lawyer advise you. Call him or her soon.

D

_____ Date

Signature of owner of premises or agent

Address

City, state, zip Telephone no.

E

CERTIFICATE OF SERVICE

I certify that on _____ I served this notice on _____
Date Name

- by
- delivering it personally to the person in possession.
 - delivering it on the premises to a member of his/her family or household or an employee of suitable age and discretion with a request that it be delivered to the person in possession.
 - first-class mail addressed to the person in possession.

Signature

Court copy (to be copied, if necessary, to attach to the complaint)

STATE OF MICHIGAN	DEMAND FOR POSSESSION TERMINATION OF TENANCY DUE TO UNLAWFUL DRUG ACTIVITY ON PREMISES Landlord-Tenant	
--------------------------	---	--

TO:

1. Your landlord/landlady, _____, is terminating your tenancy and wants to
Name (type or print)

evict you from:

Address or description of premises rented (if different from mailing address)

because you have willfully or negligently caused unlawful drug activity at the leased premises.

2. You must move within 24 hours from the date this notice was served or your landlord/landlady may take you to court to evict you.
3. If your landlord/landlady takes you to court to evict you, you will have the opportunity to present reasons why you believe you should not be evicted.
4. If you believe you have a good reason why you should not be evicted, you may have a lawyer advise you. Call him or her soon.

Date

Signature of owner of premises or agent

Address

City, state, zip Telephone no.

HOW TO GET LEGAL HELP

1. Call your own lawyer.
2. If you do not have an attorney but have money to retain one, you may locate an attorney through the State Bar of Michigan Lawyer Referral Service at 1-800-968-0738 or through a local lawyer referral service. Lawyer referral services should be listed in the yellow pages of your telephone directory or you can find a local lawyer referral service at www.michbar.org.
3. If you do not have an attorney and cannot pay for legal help, you may qualify for assistance through a local legal aid office. Legal aid offices should be listed in the yellow pages of your telephone directory or you can find a local legal aid office at www.michiganlegalhelp.org. If you do not have Internet access at home, you can access the Internet at your local library.

Tenant's copy

STATE OF MICHIGAN JUDICIAL DISTRICT	JUDGMENT OF POSSESSION AFTER LAND CONTRACT FORFEITURE	CASE NO.
--	--	-----------------

Court address Court telephone no.

Plaintiff

v

Defendant

Plaintiff/Attorney Personal service

Defendant/Attorney Personal service

THE COURT FINDS:

by hearing default* consent**

*For a defendant on active military duty, default judgment shall not be entered except as provided by the Servicemembers Civil Relief Act.

- 1. The land contract has been forfeited.
- 2. The plaintiff has a right to possession.
- 3. There is now due to plaintiff:

Amount \$ _____
 Other damages \$ _____
 Costs \$ _____
 Total \$ _____

- 4. There is no cause of action.
- 5. Payment of the purchase price:
 - a. Less than 50 percent of the purchase price has been paid.
 - b. 50 percent or more of the purchase price has been paid.

TO THE DEFENDANT, IT IS ORDERED:

6. A judgment of possession for breach of a land contract is entered in this case for the following described property:

7. An order of eviction may be issued upon expiration of 90 days 6 months after the entry of this judgment if the defendant does not:

a. pay the total amount due in item 3 above.

b. cure the following breach: _____

8. A money judgment for damages under MCL 600.5739 is awarded in the amount of \$ _____.

9. FURTHER ORDERS:

10. YOU ARE ADVISED that you may file a motion for a new trial, a motion to set aside a default judgment, or an appeal and appeal bond within 10 days of judgment. Any motion or appeal must comply with the court rules and must be filed in court by _____.

Date

_____ Date

_____ Judge

_____ Bar no.

Payment in the full amount may be made to the plaintiff or to the court by certified check or money order.

CERTIFICATE OF MAILING: I certify that on this date I served a copy of this judgment on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

_____ Date _____ Deputy clerk

**Approved:

_____ Date _____ Plaintiff/Attorney

_____ Date _____ Defendant/Attorney

STATE OF MICHIGAN JUDICIAL DISTRICT	APPLICATION AND ORDER OF EVICTION Landlord-Tenant / Land Contract	CASE NO.
--	--	-----------------

Court address

Court telephone no.

Plaintiff's name, address, and telephone no.

v

Defendant's name(s) and address(es)

Plaintiff's attorney, bar no., address, and telephone no.

NOTE: An application may be required even though a request for an order of eviction is granted in the judgment.

APPLICATION

1. On _____ judgment was entered against the defendant(s) and the plaintiff was awarded
Date possession of the following described property: _____

2. No payment has been made on the judgment or no rent has been received since the date of judgment, except the sum of
\$ _____ received under the following conditions: _____

3. The plaintiff has complied with the terms of the judgment.

4. The time stated in the judgment before an order of eviction can be issued has elapsed.

I declare that the statements above are true to the best of my information, knowledge, and belief.

Date

Plaintiff/Attorney signature

ORDER OF EVICTION

IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN:

To the Court Officer: You are ordered to restore the plaintiff to, and put the plaintiff in, full possession of the premises.



Date issued

Judge

Bar no.

NOTE: In tenancy cases, this order must be executed within 56 days of the issuance date.

**APPLICATION AND ORDER
OF EVICTION**

CASE NO.

RETURN

I certify and return that on _____ I executed the order of eviction on the **other** side of this form
Date

by evicting _____
Name(s)

from the property, and I have restored the plaintiff to peaceful possession as ordered.

Date

(Deputy) sheriff/Court officer/Bailiff

Service fee \$	Miles traveled	Fee \$	
Incorrect address fee \$	Miles traveled	Fee \$	TOTAL FEE \$

**STATE OF MICHIGAN
JUDICIAL DISTRICT**

**ORDER TO RELEASE ESCROW
Landlord-Tenant / Land Contract**

CASE NO.

Court address

Court telephone no.

Plaintiff's name, address, and telephone no.

Defendant's name, address, and telephone no.

v

Plaintiff's attorney, bar no., address, and telephone no.

Defendant's attorney, bar no., address, and telephone no.

1. On _____ an order for escrow was entered in this case.
Date

2. The conditions stated **in the** order for escrow have been met.

IT IS ORDERED:

3. The escrow established by this court's order dated _____ is released.

4. The escrow is disbursed as follows:

_____ Date

_____ Judge

_____ Bar no.

STATE OF MICHIGAN JUDICIAL DISTRICT	COMPLAINT MISDEMEANOR	CASE NO.
--	----------------------------------	-----------------

ORI _____ **Court address** _____ **Court telephone no.** _____
MI- _____

THE PEOPLE OF _____ Defendant's name and address <input type="checkbox"/> The State of Michigan v <input type="checkbox"/> _____	Victim or complainant <hr/> Complaining witness
---	--

Codefendant(s) (if known) _____ Date: On or about _____

City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	Defendant DOB
-------------------	--------------------	---------------	---------------	---------------	---------------

Police agency report no.	Charge	Maximum penalty
--------------------------	--------	-----------------

<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.	<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type _____	Defendant DLN _____
---	---	-----------------------	------------------------

Witnesses _____

STATE OF MICHIGAN, COUNTY OF _____ .

The complaining witness says that on the date and at the location described, the defendant, contrary to law,

The complaining witness asks that defendant be apprehended and dealt with according to law.

(Peace officers only) I declare that the statements above are true to the best of my information, knowledge, and belief.

Warrant authorized on _____ by: _____ Date	Prosecuting official
--	----------------------

_____ Complaining witness signature

Subscribed and sworn to before me on _____
Date

_____ Judge/Court clerk/Magistrate

STATE OF MICHIGAN JUDICIAL DISTRICT	WARRANT MISDEMEANOR	CASE NO.
--	--------------------------------	-----------------

ORI	Court address	Court telephone no.
MI-	Defendant's name and address	Victim or complainant
<input type="checkbox"/> THE PEOPLE OF <input type="checkbox"/> The State of Michigan	v	Complaining witness
<input type="checkbox"/> _____ Codefendant(s) (if known)		Date: On or about
City/Twp./Village	County in Michigan	Defendant TCN
		Defendant CTN
		Defendant SID
		Defendant DOB
Police agency report no.	Charge	Maximum penalty
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.	<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type
		Defendant DLN

Witnesses

STATE OF MICHIGAN, COUNTY OF _____ .
To any peace officer or court officer authorized to make an arrest: The complaining witness has filed a sworn complaint in this court stating that on the date and the location described, the defendant, contrary to law,

Upon examination of the complaint, I find probable cause to believe defendant committed the offense set forth. **THEREFORE, IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN,**

a. I order you to arrest and bring defendant before the _____ District Court immediately.

b. I order you to bring defendant before the _____ District Court.

c. The defendant may be released when **interim cash bail** is posted in the amount of \$ _____ for personal appearance before the court.

Date

[Redacted Signature]

Judge/Magistrate

Bar no.

By virtue of this warrant, the defendant has been taken into custody as ordered.

Date

Peace officer

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	WARRANT MISDEMEANOR <input type="checkbox"/> Traffic <input type="checkbox"/> Nontraffic	CASE NO. COURT ORI
---	--	----------------------------------

Court address

Court telephone no.

THE PEOPLE OF

The State of Michigan

V

Defendant's name and address

TO: Any peace officer or court officer authorized to make an arrest.

Upon examination of the citation, I find probable cause to believe the defendant committed the offense set forth.

THEREFORE, IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN, I command you to arrest and bring defendant before the court immediately, or defendant may be released when **interim cash bail** is posted in the amount of \$ _____ for personal appearance before the court.

COPY OF CITATION

Date

Judge/Magistrate **Bar no.**



Authorized on _____ by:
Date

Prosecuting official

By virtue of this warrant, the defendant has been taken into custody as commanded.

Date

Arresting official

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	SUPERVISION ORDER (SUPPORT ENFORCEMENT)	CASE NO.
--	--	-----------------

Court address New Form Court telephone no.

Plaintiff's name, address, and telephone no. <input type="checkbox"/> Respondent
Plaintiff's attorney, bar no., address, and telephone no.

v

Defendant's name, address, and telephone no. <input type="checkbox"/> Respondent
Defendant's attorney, bar no., address, and telephone no.

IT IS ORDERED:

1. Respondent is placed under the supervision of the friend of the court. Respondent shall participate in the services checked below. Unless a provider is named, respondent may choose a provider from the friend of the court's approved list.

- a. _____ parenting program.
- b. A parenting-skills program, sponsored by _____ .
- c. _____ work program, sponsored by _____ .
- d. _____ job-skills program.
- e. A public-service program, sponsored by _____ .
- f. Job referral at the friend of the court.
- g. A work-detail program operated by the county sheriff.
- h. Life-skills training, sponsored by _____ .
- i. _____ counseling (specify credit, job, anger, drug, alcohol, etc.).
- j. A community-corrections program, sponsored by _____ .
- k. A drug and alcohol assessment, sponsored by _____ . If a recommendation is issued as a result of the drug and alcohol assessment, the respondent shall comply with the recommendation.
- l. Other:

2. _____ is responsible for paying the costs of supervision.
Name

3. The friend of the court shall monitor the terms of this order, including the respondent's continued compliance with the current support and arrearage plan.

4. The respondent must report to the friend of the court _____ , or at the request of the friend of the court.
Frequency (weekly, monthly, etc.)

Date Judge Bar no.

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	EMPLOYER'S DISCLOSURE OF HEALTH INSURANCE AND/OR INCOME INFORMATION	CASE NO.
--	--	-----------------

Friend of the court address _____ Telephone no. _____

NOTICE TO EMPLOYER

Under Michigan law, you are required to provide information according to MCL 552.518. **Complete both sides.**

Return this completed form to the friend of the court at the above address.

Date	Name of person preparing form (type or print)	Telephone no.
------	---	---------------

The information obtained from this disclosure form will be treated as confidential and will not be used or released except for purposes of administering, enforcing, and complying with state and federal laws governing child support.

Name of contact (type or print)	Title	Telephone no.	Date
---------------------------------	-------	---------------	------

1. Employee name		2. Address	
3. Social security number	4. Employer name		5. Employer federal identification no.
6. Employer address			

7. Hourly base pay	8. Shift premium	9. COLA	10. Avg. overtime \$ /week	11. W-4 Exemp.	12. Reg. work hours /week	13. Pay period (weekly, etc.)
14. No. weeks paid this yr.	15. Date hired	16. Date of term. (if appl.)	17. Reason for leaving		18. Is this person receiving unemployment benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Calculate year-to-date figures as of last pay period.

19. INCOME	Reg. Earnings (incl. shift prem. and COLA)	Overtime	Commissions and Bonuses	Pension and Longevity	Profit Sharing	Other (explain)	Gross	Deferred income in addition to gross
Year to Date								
Last Calendar Year								
20. RETIREMENT CONTRIBUTIONS	Mandatory Employee	Voluntary Employee	Employer					
Year to Date								
Last Calendar Year								
21. OTHER INCOME	Disability	Workers Comp.	Sick Pay	SUB Pay				
Year to Date					Disability carrier			
Last Calendar Year					Worker's compensation carrier			
22. WITHHOLDING	Federal Income Tax	F.I.C.A.	State Income Tax	Local Income Tax	Mandatory Professional or Union Dues	Alimony and Child Support	Mandatory Withholding (explain)	
Year to Date								
Last Calendar Year								

Complete the **Insurance** Information on the other side.

23. Check all that apply

- Employer offers a medical flexible spending account.
- Dependent insurance not offered to employees. [REDACTED]
- Dependent insurance medical dental optical is offered to the employee but the employee has not enrolled.
(Attach information regarding dependent coverages and cost.)
- Employee will be eligible for dependent insurance. Date available: _____
(Attach information regarding dependent coverages and cost.)
- Employee has enrolled for dependent insurance. (Complete items 24 through 29. If you need additional space, use the space below.)

24. Medical insurance company name, address, telephone no. Policy no. and Group no.	25. Dental insurance company name, address, telephone no. Policy no. and Group no.				
26. Optical insurance company name, address, telephone no. Policy no. and Group no.	27. Other insurance (i.e. prescription, mental health)				
28. What dependent coverage is offered? Specify cost to employee <input type="checkbox"/> employee only <input type="checkbox"/> individual plus one <input type="checkbox"/> per family <input type="checkbox"/> Medical \$ _____ per _____ <input type="checkbox"/> Dental \$ _____ per _____ <input type="checkbox"/> Optical \$ _____ per _____					
29. What dependents of employee are covered?					
Name	DOB	Relationship	Medical	Effective Date of Coverage Dental	Optical

[REDACTED]

Use this space for any necessary explanations. [REDACTED]

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

**NOTICE OF REGISTRATION OF
OUT-OF-STATE SUPPORT ORDER
(UIFSA)**

CASE NO.

Court address

Court telephone no.

TO:

Respondent's name, address, and telephone no.
(nonregistering party)

Petitioner's name

v

Respondent's name

1. Date of registration: _____

2. Date of notice: _____

3. An order for
 payment of support,
 income withholding to pay child support,

issued by a court in _____
County and state

_____ ,
has been registered with the county clerk of this
county for enforcement. modification.

4. Arrearage as of _____ :
Date

\$ _____

- 5. A copy of the registered support order and other related documents are attached to this notice.
- 6. The attached order is an ORDER OF THIS COURT, immediately enforceable in this state as if the order was issued in this state. Payments shall be made through the Michigan State Disbursement Unit.
- 7. The payer of support must pay all fees as required by Michigan law.
- 8. If you wish to contest the validity or enforcement of this registered order, you must request a hearing within 20 days from the date this notice was mailed or personally served on you (see proof of service on back) by completing the request for hearing on the bottom of this notice and returning it to the court address above. Failing to request a hearing will result in automatic confirmation of the registered order and amounts owed, and precludes you from contesting any matter that you could have asserted at registration.
- 9. If you request a hearing, you will be notified of the date, time, and location of the hearing, by first-class mail sent to the address you provide.
- 10. At the hearing to contest the validity or enforcement of this registered order, you may present only matters available as a defense in an action to enforce a foreign money judgment.

Check this box to request a hearing. Complete the request and return it to the court at the above address.

REQUEST FOR HEARING

I request a hearing on the matter of the registration of a support order for the following reason(s). (Check all that apply.)

- The registering state does not issuing state did not have personal jurisdiction over me.
- The order was obtained by fraud.
- The order has been vacated, suspended, or modified by later order.
- The issuing state has stayed its order pending appeal.
- The arrearage amount stated is wrong because I have made full or partial payment.
- The statute of limitations precludes enforcement of some or all arrearages.
- The following defense is available under the laws of this state to the remedy sought to enforce the registered order:

Other: (Explain.) _____

My address, if different from above, is _____ .

_____ Date

_____ Signature

Proof of Service on reverse

PROOF OF SERVICE

**Notice of Registration of
Out-of-State Support Order**
Case No. _____

TO PROCESS SERVER: You must serve the copies of the notice of registration of out-of-state support order and all attachments and file proof of service with the court clerk. If you are unable to complete service, you must return this original and all copies to the court clerk.

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE

OFFICER CERTIFICATE

OR

AFFIDAVIT OF PROCESS SERVER

I certify that I am a sheriff, deputy sheriff, bailiff, appointed court officer, or attorney for a party (MCR 2.104[A][2]), and that: (notarization not required)

Being first duly sworn, I state that I am a legally competent adult who is **not** a party or an officer of a corporate party, and that: (notarization required)

I served a copy of the notice of registration of the out-of-state support order, together with all attachments by:
 personal service certified mail (return receipt attached) first-class mail

on:

Name of respondent	Complete address of service	Day, date, time

I have personally attempted to serve a copy of the notice of registration of the out-of-state support order, together with all attachments on _____
Name
at _____
Address
and have been unable to complete service.

I declare that the statements above are true to the best of my information, knowledge, and belief.

Service fee	Miles traveled	Fee	TOTAL FEE
\$		\$	
Incorrect address fee	Miles traveled	Fee	
\$		\$	\$

Signature

Name (type or print)

Title

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Deputy court clerk/Notary public

Notary public, State of Michigan, County of _____

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received a copy of the notice of registration of the out-of-state support order together with all attachments on _____ on behalf of _____.
Day, date, time

Signature of respondent

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	ORDER VACATING/CONFIRMING REGISTRATION OF OUT-OF-STATE SUPPORT ORDER (UIFSA)	CASE NO.
--	---	-----------------

Court address _____ Court telephone no. _____

Petitioner's name, address, and telephone no.

Attorney:

v

Respondent's name, address, and telephone no.

Attorney:

1. Date: _____

Judge: _____ Bar no.

After hearing No hearing requested.

2. An order issued by _____
Name of issuing tribunal and state

requiring payment of child support was registered

in this county on _____
Date

3. A notice of registration of out-of-state support
order, dated _____,
was served on the respondent.

THE COURT FINDS:

4. a. The respondent did not request a hearing within 20 days from the date of the notice.
 b. The respondent challenged the validity of the enforcement of the order and evidence was presented.
5. The petitioner did did not appear. The respondent did did not appear.

IT IS ORDERED:

6. a. The registered order is vacated.
 b. The registered order is confirmed and cannot be contested with regard to any matter that could have been asserted at the time of registration.
- 1) Income withholding shall be implemented immediately upon entry of this order. All payments shall be paid through the Michigan State Disbursement Unit at MiSDU, PO Box 30351, Lansing, MI 48909.
 - 2) Both parties shall immediately notify the friend of the court in writing, within 21 days of the change, of any change in: a) their mailing and residential addresses and telephone numbers; b) the names, addresses, and telephone numbers of their employers or sources of income; c) their health maintenance or insurance companies, insurance coverage or contract numbers; d) their occupational or drivers' licenses; and e) their social security numbers unless exempt by law under MCL 552.603. Failure to do so may result in a fee being imposed.
 - 3) Support is a judgment the date it is due and is not modifiable retroactively.
 - 4) Unpaid support is a lien on a payer's property by operation of law and real and personal property can be encumbered or seized if an arrearage accrues in an amount greater than the periodic support payments payable for two months under the payer's support order.
 - 5) Other:
- c. Arrearages of \$ _____ are due as of _____
Date

Date

Judge

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

Date

Signature

MCL 552.2607, MCL 552.2608

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

STATEMENT OF ACCOUNT

CASE NO.

Friend of the court address

Telephone no.

Plaintiff's name and address

v

Defendant's name and address

1. Name of payer: _____

2. Date of support order: _____

3. I certify that as of _____ the overdue support and other obligations on the records of the Michigan
Date Child Support Enforcement System were:

Type of payment	Charge amount	Frequency of payment	Overdue amount
a. Child support			
b. Spousal support			
c. Fixed obligation			
d. Confinement/ Medical expenses			
e. Service fees			
f. Other			
Total			

4. Last payment date: _____

Last payment amount: _____

Date

Signature

Name (type or print)

Title

Form FOC 61

OBJECTION TO EX PARTE ORDER AND MOTION TO RESCIND OR MODIFY

Use this form if:

- you have been served with an ex parte order (an order entered without a hearing) for support, parenting time, or custody; **and**
- you want to object to and change that order.

If you want to object to and change the ex parte order, you must file an objection and motion within 14 days after you are served with the ex parte order. After you file the objection and motion, the friend of the court is required to attempt to resolve the dispute within 14 days after receiving your objection.

If the dispute cannot be resolved by the friend of the court, the matter will be scheduled by the friend of the court for a hearing. You may represent yourself at the hearing or have an attorney represent you. The friend of the court office does not have to make an investigation or report unless ordered by the court to do so. The friend of the court does not represent either party at this hearing.

MOTION CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

1. Fill out all requested information on the form? YES
2. Make all necessary copies? YES
3. Mail (serve) a copy of the objection and motion on the other party and on any other custodian/guardian after the judge and hearing date were assigned to your case by the clerk? YES
4. Return to the clerk's office **after** you mailed the objection and motion and notice of hearing to the other party and completed the certificate of mailing? YES
5. Keep one copy of the objection and motion and notice of hearing form for yourself? YES
6. Give two copies of the completed form to the clerk of the court? YES

If you cannot answer "yes" to all the above steps, a hearing on your motion may be delayed or your motion may be dismissed.

By using this form packet you are representing yourself in a court action regarding an ex parte support, parenting time, or custody order. In order to receive the action you seek, you must follow the instructions in this packet. If you fail to do even one of the required steps, the order you get from the court may not give you the relief you want.

If you have any questions about any steps in the process, refer to pages 3 through 5 of this booklet for details.

**INSTRUCTIONS FOR USING FORM FOC 61
OBJECTION TO EX PARTE ORDER AND MOTION TO RESCIND OR MODIFY**

»» FILING AN OBJECTION AND MOTION

1. Fill out the Objection and Motion form.

Use the instructions on page 6. Be careful not to make mistakes.

Before filling out the "Notice of Hearing" part of the form, contact the friend of the court office to find out who to contact about getting a hearing date. Then contact the person or office as directed by the friend of the court office. Fill in the form with the information you get about the hearing date, location of hearing, and name of the judge or referee who will be hearing the motion.

Make at least five copies of the forms after you have filled it out.

2. File the Objection and Motion form with the county clerk.

Take the original and five copies of the form to the county clerk in the county where your case is located.

There is no filing fee.

The county clerk will write the name of the judge assigned to your case on your form. The clerk will keep the original and one copy of the objection and motion and any attachments for the court file and the friend of the court. Then the clerk will return four copies and remaining attachments to you. Do not lose them.

What you should have when you leave the clerk's office:

- One copy of FOC 61 (with any attachments) - for you
- One copy of FOC 61 (with any attachments) - for the other party
- One copy of FOC 61 - for proof of service to the court
- One copy of FOC 61 - for proof of service to the friend of the court

»» SERVING THE OBJECTION AND MOTION ON THE PARTY OR PARTIES

1. Serve the Objection and Motion and Notice of Hearing on the other party.

The other parent, or other party (if there is a custodian or guardian other than a parent) must be served with (notified of) the objection and motion and hearing date at least 9 days before the hearing date.

NOTE: Serve the papers by mailing them to the other party by first-class mail.

What you need for service:

One copy of FOC 61 (with any attachments) - for the other party
Two copies of FOC 61 - for proof of service
Any additional copies of FOC 61 (with any attachments) - for other custodian or guardian if there is someone other than the other parent who has care or custody of the child(ren).

Mail one copy with attachments to the other party. If there is a custodian or guardian, mail one copy and the attachments to him/her. Then fill out the Certificate of Mailing on the front of the remaining three copies. Keep one copy for your own records.

2. Return to the county clerk.

Once you have mailed the objection and motion and notice of hearing and filled out the Certificate of Mailing on the remaining three copies, return to the county clerk's office with two copies. Remember to keep one copy for your own records. The county clerk will deliver one copy to the friend of the court.

3. Response from other party.

If you receive a response to your objection and motion from the other party, make sure you read it before you attend the hearing. Think about what you want to say on your behalf.

4. Attend the hearing.

You must attend the hearing on the motion.

»» INFORMATION ABOUT ATTENDING THE HEARING

Bring the original and five copies of the Order Modifying Ex Parte Order (form FOC 62) with you to the hearing. Also bring all supporting papers you have and any witnesses who are willing to testify.

1. Because you are representing yourself, you are expected to conduct yourself as an attorney would and to follow the same general rules an attorney would.
2. Make a list of information you think is important for the referee or judge to know. The information should relate to the reasons stated in your objection and motion. You can use this list as a reminder to bring up the points you think are important.
3. If you think you need to order someone to attend this hearing, follow the procedure in Michigan Court Rule 2.506 or consult with an attorney.
4. Go to the judge's courtroom or referee's hearing room on the scheduled day and time. Dress neatly. Arrive 10 or 15 minutes early. Be prepared to spend most of the morning or

afternoon in court. Bring any witnesses with you.

5. If you are responsible for preparing the order, bring all copies of your order form.
6. Go into the courtroom or referee hearing room and tell the referee or clerk (sitting near the judge's bench) your name, that you are there for a hearing, and you are representing yourself. Do not interrupt any hearing in progress. Then take a seat in the back of the courtroom and wait for your case to be called.
7. When your case is called, be prepared to state:
 - 1) your name.
 - 2) that you are representing yourself.
 - 3) that you need an order modifying or rescinding an ex parte order.
 - 4) the facts or reasons for your request (**bring papers that support your facts or reasons**).
 - 5) why you believe this order would not be contrary to the best interests of the child(ren).

Answer the judge's or referee's questions clearly and directly. If the judge or referee wants to hear from the other witnesses, ask them to tell the court what they saw or know regarding your situation.

8. If the other party is in court, he or she will have a chance to speak also. When the other party talks, take notes. Do not interrupt the other party. After the other party speaks, you will have another chance to talk. Taking notes will help you with this.
9. After the judge or referee makes a decision, follow the instructions on the packet for FOC 62, "Order Modifying Ex Parte Order." You are responsible for preparing the order even if you do not get what you are asking.

NOTE: If your hearing was held before a referee and you do not agree with the referee's decision, you have 21 days from the date you receive the referee's recommendation to file an objection and request a de novo hearing before the judge. Use the packet for FOC 68, "Objection to Referee's Recommended Order."

INSTRUCTIONS FOR COMPLETING "OBJECTION AND MOTION TO RESCIND OR MODIFY EX PARTE ORDER"

Please print neatly. After filling in the form, you will need to make at least three copies.

Items A through H must be completed before your objection and motion can be filed with the court. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Before you fill in the Case No., get your court papers for divorce, separate maintenance, family support, or paternity and copy the Case No. from those court papers onto this form.
- B** Also use your court papers to fill in the "Plaintiff" and "Defendant" boxes. Copy the names from these court papers onto this form. For example, if your name is in the box that says "plaintiff," then you should write your name in the "plaintiff" box on this motion form.
- C** You are the "moving party." Write in your name.
- D** Write in the date of the ex parte order. This is usually next to the signature of the judge or referee, at the bottom of the order.
- E** Check the boxes that apply. For example, if you are objecting to the support provisions of the ex parte order, check that box. Then explain why you think the order should be changed. If you need more space, use a separate sheet of paper.
- F** Write in today's date and sign your name. Now contact the the friend of the court office in your county to find out how to get a hearing date. See page 3 of this booklet for details.
- G** Once you get a hearing scheduled, fill in the full name of the judge or referee who will be hearing this motion, the date of the hearing, the time of the hearing (include whether it is a.m. or p.m.), and the place of the hearing.

Now go to the county clerk's office with the original and five copies of this form and the four copies of each separate sheet. The clerk will attach one copy of each separate sheet to four of the copies. The clerk will return four copies to you.

Read page 3 of this booklet for details on mailing this form to the other party.

- H** On the date you mail one copy (and the separate sheets) to the other party, write in the date and sign your name on the remaining three copies.

Return to the county clerk with two copies. Read page 4 of this booklet for details.

You must read this booklet for directions on the legal process.

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

**OBJECTION TO EX PARTE ORDER AND
MOTION TO RESCIND OR MODIFY**

A

CASE NO.

Court address

Court telephone no.

B

Plaintiff's name, address, and telephone no.

Please print or type information.
Note: There is no filing fee.

v

Defendant's name, address, and telephone no.

OBJECTION AND MOTION

C I, _____, state:
Name of party filing motion

D 1. I have been served with an ex parte order in this case dated _____ .

E 2. I object to the custody parenting-time support provisions of that order because:

I request that a hearing be held to rescind or modify the ex parte order.

F _____
Date Signature of party filing motion

NOTICE OF HEARING

G A hearing will be held on this motion before _____ on
Judge/Referee Bar no.

_____ at _____ at _____
Date Time Location

If you require special accommodations to use the court because of a disability, or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements. When contacting the court, provide your case number(s).

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this motion and notice of hearing on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

H _____
Date Signature

Form FOC 62

ORDER MODIFYING EX PARTE ORDER

Use this form if:

- you had a hearing on your Objection to Ex Parte Order and Motion to Rescind or Modify (form FOC 61) and both you and the other party or third party agree to sign the order without another hearing;
- or
- you had a hearing on your Objection to Ex Parte Order and Motion to Rescind or Modify (form FOC 61) and the other party or third party will not sign the order.

ORDER CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

1. Fill out all requested information on the form? YES
2. Make all necessary copies? YES
3. Get the judge's signature? (NOTE: See pages 3-4 for details) YES
4. Return to the clerk's office with **all** copies of the signed order? YES
5. Make sure the clerk stamps all copies of the signed order? YES
6. Keep one copy of the signed order for yourself? YES
7. Mail (serve) a copy of the order on the other party and on any other custodian/guardian after it was stamped by the clerk? YES
8. Give two copies of the completed form to the clerk of the court? YES

If you cannot answer "yes" to all the above steps, you do not have a valid order.

By using this form packet you are representing yourself in a court action regarding an ex parte support, parenting time, or custody order. In order to receive the action you seek, you must follow the instructions in this packet. If you fail to do even one of the required steps, the order you get from the court may not give you the relief you want.

If you have any questions about any steps in the process, refer to pages 3 through 4 of this booklet for details.

INSTRUCTIONS FOR GETTING THE ORDER SIGNED AFTER A HEARING

»» SIGNING AND FILING OF AN ORDER

1. Fill out the order form.

Normally you will fill out the order at the hearing on the motion. Use the instructions on page 4. Be careful not to make mistakes.

Make copies of the form based on the instructions in booklets for forms FOC 53 or FOC 54 depending on your situation.

2. Approval by friend of the court.

In some courts the order has to be approved by the friend of the court before the judge will sign it. Contact the friend of the court office and ask if the order must be approved by it. Then complete either step a. or b. below.

- a. If the order must be approved by the friend of the court, go to the friend of the court office with the original and five copies of the order. Leave the order with the office. Someone from the office should tell you when to come back for the order or should call you when the order has been approved. If you do not hear from the office within 5 days, call them to find out when to pick up the order. Go back and pick up the order. Then complete step 3 below.
- b. If the order does not need to be approved by the friend of the court, complete step 3 below.

3. Get the order signed by the judge.

After you have filled out the order, you must get it signed by the judge. **If both you and the other party sign the order to show you both approve the order, then contact the friend of the court office to find out how to get the order signed by the judge. Otherwise** you must do either of the following:

- a. Schedule and attend a hearing to get the order signed.
(Use the packet for form FOC 53, Notice of Hearing to Enter Order.)
- b. Notify the other party in writing that the order will be given to the judge to sign and that he or she has 7 days to file any written objections. If no objections are filed by the other party, the order can be signed. **(Use the packet for form FOC 54, Notice to Enter Order Without Hearing.)**

INSTRUCTIONS FOR COMPLETING "ORDER MODIFYING EX PARTE ORDER"

Please print neatly. After filling in the form, you will need to make at least five copies.

Items A through H must be completed before the order can be given to the judge for signature. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Before you fill in the Case No., get your copy of the Motion (form FOC 61) or your court papers for divorce, annulment, separate maintenance, or paternity. Copy the Case No. from that paper onto this form.
- B** Also use the motion or other court papers to fill in the "Plaintiff" and "Defendant" boxes. Copy the names from the motion or other court papers onto this form. For example, if your name is in the box that says "plaintiff," then you should write your name in the "plaintiff" box on this order form.
- C** Fill in the date of the hearing and the name of the judge or referee who heard your objection and motion (form FOC 61).
- D** Check the boxes that say what the judge or referee ordered at the hearing on the motion. Then write in the blank space provided what the judge or referee ordered at the hearing. This information must state as closely as possible the exact words of the judge or referee. Use the notes you took at the hearing when filling out this part of the order form. Make sure the Uniform Support Order is completed and attached (form FOC 10/52).
- E** Check this box if the judge or referee ordered something else. This information must state as closely as possible the exact words of the judge or referee. Use the notes you took at the hearing when filling out this part of the order form.
- F** Write in the date that the order is to take effect (when the provisions in the order are to begin).
- G** If you filed an objection and motion (form FOC 61) and the other party has agreed to sign the order without a hearing to enter the order, both you and the other party must sign here. If the other party will not sign the order without a hearing to enter the order, follow the directions on scheduling a hearing in the booklet for form FOC 53, Notice of Hearing to Enter Order.

To find out how to get the order signed, contact the friend of the court office for instructions. See page 3 of this booklet for details.
- H** On the date you serve a copy on the other party, write in the date and sign your name on the remaining three copies. Return to the county clerk with two copies.

You must read this booklet and other booklets dealing with orders for directions on the legal process.

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

ORDER MODIFYING EX PARTE ORDER

(A)

CASE NO.

Court address

Court telephone no.

(B)

Plaintiff's name, address, and telephone no.

Attorney:

v

Defendant's name, address, and telephone no.

Attorney:

Please print or type information.

(C)

On _____,
Date of hearing

Judge/Referee

found that the ex parte order should be modified.

IT IS ORDERED:

(D) 1. Custody Parenting time is changed to:

2. Support is changed. The Uniform Support Order is incorporated by reference.

(E) 3. Other: (See attached.)

(F) 4. The changes made in this order shall start on _____ .
Date

5. Except as changed in this order, all other provisions of the ex parte order shall remain in effect until further order of the court.

(G)

Plaintiff's signature (approved as to form and content)

Defendant's signature (approved as to form and content)

Date

Judge Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

(H)

Date

Signature

Form FOC 87

MOTION REGARDING CUSTODY

Use this form if:

- you have a pending case for custody, divorce, separate maintenance, family support or paternity; or
- you are a party who has a custody order through a judgment of custody, divorce, separate maintenance, or family support order, or an order of filiation; or
- you want to change domicile of the child(ren) to another state or to more than 100 miles away. You must also use form FOC 115, Motion to Change Domicile.

You cannot use this form:

- to start a custody case; or
- if you are a third party and want to intervene to get custody of the child(ren) in a pending case for custody, divorce, separate maintenance, family support, or paternity.

MOTION CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

1. Fill out all requested information on the form? YES
2. Complete and attach MC 416, Uniform Child Custody Jurisdiction Enforcement Act Affidavit? YES
3. Make all necessary copies? YES
4. Pay the fees to the clerk? YES
5. Mail (serve) a copy of the motion and MC 416 on the other party and on any other custodian/guardian after the judge and hearing date were assigned to your case by the clerk? YES
6. Return to the clerk's office **after** you mailed the motion and notice of hearing and MC 416 to the other party and completed the certificate of mailing? YES
7. Keep one copy of the motion and notice of hearing and MC 416 forms for yourself? YES
8. Give two copies of the completed form to the clerk of the court? YES

If you cannot answer "yes" to all the above steps, a hearing on your motion may be delayed or your motion may be dismissed.

By using this form packet you are representing yourself in a court action regarding custody. In order to receive the action you seek, you must follow the instructions in this packet. If you fail to do even one of the required steps, the order you get from the court may not give you the custody you want.

If you have any questions about any steps in the process, refer to pages 3 through 5 of this booklet for details.

**INSTRUCTIONS FOR USING FORM FOC 87
FILING A MOTION AND SERVING A MOTION**

»» FILING A MOTION

1. Fill out the Motion form.

Use the instructions on page 6. Be careful not to make mistakes.

Before filling out the “Notice of Hearing” part of the form, contact the friend of the court office to find out whom to contact about getting a hearing date. Then contact the person or office as directed by the friend of the court office. Fill in the form with the information you get about the hearing date, location of hearing, and name of the judge or referee who will be hearing the motion.

Make at least five copies of the form after you have filled it out.

2. Fill out MC 416, Uniform Child Custody Jurisdiction Enforcement Act Affidavit.

3. File the Motion form and MC 416 with the county clerk.

Take the original and five copies of the form and MC 416 to the county clerk in the county where your case is located.

You must pay a \$20.00 motion fee. You may also be required to pay an \$80.00 judgment and order entry fee when the motion and MC 416 are filed. If you can't afford to pay the fees, ask the county clerk for an Affidavit and Order, Suspension of Fees/Costs (form MC 20 not included in this packet) to fill out.

The county clerk will write the name of the judge assigned to your case on your form. The clerk will keep the original and one copy of the motion, MC 416 and any attachments for the court file and the friend of the court. Then the clerk will return four copies and remaining attachments to you. Do not lose them.

What you should have when you leave the clerk's office:

- One copy of FOC 87 and MC 416 (with any attachments) - for you
- One copy of FOC 87 and MC 416 (with any attachments) - for the other party
- One copy of FOC 87 - for proof of service to the court
- One copy of FOC 87 - for proof of service to the friend of the court

»» SERVING THE MOTION ON THE OTHER PARTY OR PARTIES

1. Serve the Motion, MC 416 and Notice of Hearing on the other party.

The other parent, or other party (if there is a custodian or guardian other than a parent) must be served with (notified of) the motion and hearing date at least 9 days before the hearing date.

NOTE: Serve the papers by mailing them to the other party by first-class mail.

What you need for service:

One copy of FOC 87 and MC 416 (with any attachments) - for the other party

Two copies of FOC 87 - for proof of service

Any additional copies of FOC 87 and MC 416 (with any attachments) - for another custodian or guardian if there is someone other than the other parent who has care or custody of the child(ren)

Mail one copy with attachments and MC 416 to the other party. If there is a custodian or guardian, mail one copy with attachments and MC 416 to **him or her**. Then fill out the Certificate of Mailing on the front of the remaining three copies. Keep one copy of the forms and attachments for your own records.

2. Return to the county clerk.

Once you have mailed the motion and notice of hearing and MC 416 and filled out the Certificate of Mailing on the remaining three copies of FOC 87, return to the county clerk's office with two copies. Remember to keep one copy for your own records. The county clerk will deliver one copy to the friend of the court.

3. Response from other party.

If you receive a response to your motion from the other party, make sure you read it before you attend the hearing. Think about what you want to say on your behalf.

4. Attend the hearing.

You must attend the hearing on the motion.

»» INFORMATION ABOUT ATTENDING THE HEARING

Bring the original and five copies of the Order Regarding Custody (form FOC 89) and, as needed, the Uniform Child Support Order (form FOC 10/52) with you to the hearing. Also bring all supporting papers you have and any witnesses who are willing to testify.

1. Because you are representing yourself, you are expected to conduct yourself as an attorney would and to follow the same general rules an attorney would.
2. Make a list of information you think is important for the referee or judge to know. The information should relate to the reasons stated in your motion. You can use this list as a reminder to bring up the points you think are important.
3. If you think you need to order someone to attend this hearing, follow the procedure in Michigan Court Rule 2.506 or consult with an attorney.
4. Go to the judge's courtroom or referee's hearing room on the scheduled day and time. Dress neatly. Arrive 10 or 15 minutes early. Be prepared to spend most of the morning or afternoon in court. Bring any witnesses with you.

5. If you are responsible for preparing the order, bring all copies of your order form.
6. Go into the courtroom or referee hearing room and tell the referee or clerk (sitting near the judge's bench) your name, that you are there for a hearing, and you are representing yourself. Do not interrupt any hearing in progress. Then take a seat in the back of the courtroom and wait for your case to be called.
7. When your case is called, be prepared to state:
 - 1) your name.
 - 2) that you are representing yourself.
 - 3) that you need a custody order or a change in a custody order.
 - 4) the facts or reasons for your request (**bring papers such as reports that support your facts or reasons including income information such as pay stubs, W-2 forms, income tax forms, etc.**).
 - 5) why you believe this order would be in the best interests of the child(ren).
 - 6) whether you have witnesses in court who are willing to testify.

Answer the judge's or referee's questions clearly and directly. If the judge or referee wants to hear from the other witnesses, ask them to tell the court what they saw or know regarding your situation.

8. If the other party is in court, he or she will have a chance to speak also. When the other party talks, take notes. Do not interrupt the other party. After the other party speaks, you will have another chance to talk. Taking notes will help you with this.
9. After the judge or referee makes a decision, follow the instructions on the packet for FOC 89, "Order Regarding Custody and Parenting Time." As needed, follow the instructions for the packet for FOC 10/52, "Uniform Child Support Order," to complete that part of the order. You are responsible for preparing the order even if you do not get what you are asking.

NOTE: If your hearing was held before a referee and you do not agree with the referee's decision, you have 21 days from the date you receive the referee's recommendation to file an objection and request a de novo hearing before the judge. Use the packet FOC 68, "Objection to Referee's Recommended Order."

INSTRUCTIONS FOR COMPLETING "MOTION REGARDING CUSTODY"

Please print neatly. After filling in the form, you will need to make at least five copies of the form.

Items A through J must be completed before your motion can be filed with the court. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Before you fill in the Case No., get your court papers for custody, divorce, separate maintenance, family support or paternity and copy the Case No. from those court papers onto this form.
- B** Also use your court papers to fill in the "Plaintiff" and "Defendant" boxes, and if applicable, the "Third Party" box. Copy the names from these court papers onto this form. For example, if your name is in the box that says "plaintiff," then you should write your name in the "plaintiff" box on this motion form.
- You are the "moving party." Once you have written the names where they belong, you must check the box "moving party" in the same box as your name.
- C** **Check only one box.** If you have a judgment or order for custody, divorce, separate maintenance, family support, or paternity, read it carefully to find out if there is any information in it about custody. If there is information about custody, check box a. If there is no information about custody, check box b.
- D** Check this box only if you checked box a. in **C** above. Read your court papers for custody, divorce, separate maintenance, family support, or paternity to find out who was ordered to have custody. Write this information here along with the name(s) of the child(ren).
- E** State who the child(ren) are living with now, the address or location where the child(ren) are living, and the date the child(ren) started living there even if it is different than what was ordered.
- F** State the circumstances that require a custody order or a change in custody. **Explain in as much detail as possible** what has happened. If you need more space, use a separate sheet of paper. Print this information as neatly as you can. You will need four copies of this sheet to attach to four copies of this form.
- G** State the causes that require a custody order or a change in custody. The judge or referee will review these causes using factors from the Child Custody Act to determine the best interests of the child. **Explain in as much detail as possible** what the causes are. If you need more space, use a separate sheet of paper. Print this information as neatly as you can. You will need four copies of this sheet to attach to four copies of this form.
- H** Check this box if you and the other party agree about custody. **Explain in as much detail as possible** what you agreed to including support and parenting time. If you need more space, use a separate sheet of paper. Print this information as neatly as you can. You will need four copies of this sheet to attach to four copies of this form.
- I** You need to **explain in as much detail as possible** what you want the court to order. If you checked **H** above, you only need to write "Same as 7. above." If you need more space, use a separate sheet of paper. You need to include information about support and parenting time as well. Print this information as neatly as you can. You will need four copies of this sheet to attach to four copies of this form.
- J** Write in today's date and sign your name. Now contact the the friend of the court office in your county to find out how to get a hearing date. See page 3 of this booklet for details.
- K** Once you get a hearing scheduled, fill in the full name of the judge or referee who will be hearing this motion, the date of the hearing, the time of the hearing (include whether it is a.m. or p.m.), and the place of the hearing.
- Now go to the county clerk's office with the original and five copies of this form and the four copies of each separate sheet. The clerk will attach one copy of each separate sheet to four of the copies. The clerk will return four copies to you. Read page 3 of this booklet for details on mailing this form to the other party.
- L** On the date you mail one copy (and the separate sheets) to the other party, write in the date and sign your name on the remaining three copies.
- Return to the county clerk with two copies. See page 4 of this booklet for details.

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

MOTION REGARDING CUSTODY

(A) CASE NO.

Court address

Court telephone no.

(B) Plaintiff's name, address, and telephone no. moving party

v

Third-party name, address, and telephone no. moving party

Defendant's name, address, and telephone no. moving party

(C) 1. a. On _____ a judgment
Date
or order was entered regarding custody.
 b. There is currently no order regarding custody.

2. Attached is a completed Uniform Child Custody Jurisdiction Enforcement Act Affidavit (MC 416).

(D) 3. The plaintiff defendant third party was ordered to have custody of the following child(ren):

(E) 4. The child(ren) have been living with _____ at
Name(s)
_____ since _____
Complete address Date

(F) 5. Circumstances have changed as follows that require custody or a change in custody:
Use a separate sheet to explain in detail what has happened and attach. Include all necessary facts.

(G) 6. Proper cause exists as follows that require custody or a change in custody: Use a separate sheet to explain in detail which factors of the Child Custody Act for determining best interests of the child(ren) are affected by the circumstances in 5 above. Include all necessary facts.

(H) 7. _____ and I agree to custody, support, and parenting time as follows:
Name
Use a separate sheet to explain in detail what you have agreed on and attach. Include all necessary facts.

(I) 8. I ask the court to order that custody, parenting time, and support be as follows:
Use a separate sheet to explain in detail what you want the court to order and attach.

(J) _____
Date Moving party's signature

NOTICE OF HEARING

A hearing will be held on this motion before _____
Judge/Referee Bar no.

(K) on _____ at _____ at _____
Date Time Location

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

NOTE: If you are the person receiving this motion, you may file a response. Contact the friend of the court office and request form FOC 88.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this motion, a Uniform Child Custody Jurisdiction Enforcement Act Affidavit and notice of hearing on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

(L) _____
Date Moving party's signature

Original - Friend of the court
1st copy - Lien recorder
Additional copies as needed

Approved, SCAO

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	NOTICE OF LIEN	CASE NO. (Claimant's Case Number)
Friend of the court address		Telephone no.

TO: Lien recorder

Plaintiff's name, address, and telephone no. obligor

FROM: Friend of the Court - Claimant (address above)
 This lien results from a support order entered registered on _____
 Date _____ by the _____ Circuit Court,
 _____ County, Michigan. This order
 requires the obligor named above to pay support in the amount of \$ _____
 per _____.

v

Defendant's name, address, and telephone no. obligor

Obligor's date of birth

As of _____ the obligor owes unpaid support in the amount of \$ _____ and this lien amount is subject to an interest rate of ____%. Michigan support orders accrue a surcharge as defined in MCL 552.603a. Prospective amounts of support, not paid when due, are judgments and accrue to the lien amount. This lien attaches to all nonexempt real and personal property of the obligor named above that is located or recorded within the state/county/other subdivision of the state of filing, including any property specifically described as follows:

The priority and enforcement aspects of this lien are governed by the law of the state where the property is located. An obligor must follow the laws and procedures of the state where the property is located or recorded to contest or challenge this lien. This lien remains in effect until released by the claimant or in accordance with the laws of the state of filing.

Note to Lien Recorder: Please provide the claimant with a copy of the filed lien, containing the recording information, at the address above. As an authorized agent of a state, or subdivision of a state, responsible for implementing the support enforcement program set forth in Title IV, Part D, of the Federal Social Security Act (42 USC 651 *et seq.*), I have authority to file this support lien in any state or U.S. Territory.

For other information regarding this lien, including payoff amount, contact the claimant at the above address. Please reference the above case number.

Signature of friend of the court authorized representative

Name (type or print)

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Date Signature: _____
Notary public

Notary public, State of Michigan, County of _____
Name (type or print)

Date served on lien recorder: _____

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

**REQUEST TO REOPEN
FRIEND OF THE COURT CASE**

CASE NO.

Court address

Court telephone no.

Plaintiff's name, address, and telephone no.

v

Defendant's name, address, and telephone no.

Attorney:

Attorney:

On _____ an order was entered exempting this case from friend of the court services.
Date

I REQUEST that the friend of the court case be reopened upon filing this request with the friend of the court office.

I have attached a completed Verified Statement (form FOC 23) and a completed Application for Title IV-D Child Support Services (form DHS 1201-D).

Date

Signature

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this request on the friend of the court and on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

Date

Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	NOTICE OF REDIRECTION OR ABATEMENT OF CHILD SUPPORT	CASE NO.
--	--	-----------------

Friend of the court address

Telephone no.

Plaintiff's name, address, and telephone no.

Current support recipient's name and address

Attorney:

v

Defendant's name, address, and telephone no.

Proposed support recipient's name and address

Attorney:

1. The friend of the court has been advised that the minor child(ren) named below is/are no longer in the care of the current support recipient:

Child(ren)'s name(s)

2. The friend of the court will be taking the following action unless a written objection is received from either party within 21 days of the date of mailing of this notice:

Redirection of Support:

The current support ordered for the minor child(ren) will be redirected to _____, Proposed support recipient

the person providing the actual care, support, and maintenance of the minor child(ren).

Abatement of Support:

The current support ordered for the minor child(ren) will be abated because it is reported that the minor child(ren) are residing full-time with the payer of support.

3. This change is effective on _____ Date

_____ Date

_____ Friend of the court/Authorized representative

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this notice to the parties or their attorneys and the person(s) named above by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

_____ Date

_____ Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	DISMISSAL (DOMESTIC RELATIONS)	CASE NO.
--	---	-----------------

Court address New Form Court telephone no.

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

v

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

NOTICE OF DISMISSAL BY PLAINTIFF

1. Plaintiff/Attorney for plaintiff files this notice of dismissal of this case.
2. I certify, under penalty of contempt, that:
 - a. This notice is the first dismissal filed by the plaintiff based upon or including the same claim against the defendant.
 - b. All costs of filing and service have been paid.
 - c. **No answer or motion has been served upon the plaintiff by the defendant** as of the date of this notice.
 - d. A copy of this notice has been provided to the appearing defendant/attorney by mail personal service.

Date

Plaintiff/Attorney signature

STIPULATION TO DISMISS

I stipulate to the dismissal of this case.

Date

Plaintiff/Attorney signature

Date

Defendant/Attorney signature

ORDER TO DISMISS

IT IS ORDERED this case is dismissed. Conditions, if any: _____

This order resolves the last pending claim and closes the case.

Date

Judge Bar no.

NOTE: For domestic relations cases, if you applied for Title IV-D child support services and your case is dismissed, your services will stop 60 days after the date of this notice. If you do not want your Title IV-D services to stop and you need child support services, please contact the Office of Child Support at 1-866-540-0008.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	JUDGMENT Civil	CASE NO.
---	---------------------------	-----------------

Court address _____ Court telephone no. _____

Plaintiff(s)

Defendant(s)

v

Plaintiff's/Plaintiff's attorney name, address, and telephone no.

Defendant's/Defendant's attorney name, address, and telephone no.

JUDGMENT

For: _____

Against: _____

- Trial Consent
- Summary Disposition Default*

DISMISSAL

- Without prejudice With prejudice
- No cause of action

*For a defendant on active military duty, default judgment shall not be entered except as provided by the Servicemembers Civil Relief Act.

ORDER OF JUDGMENT NOT INCLUDING STATUTORY INTEREST

Damages: _____ \$ _____

Costs (fees): filing \$ _____ jury \$ _____ motion \$ _____ service \$ _____

statutory \$ _____ (MCL 600.2441) \$ _____

Attorney fee: statutory other (specify) _____ \$ _____

Total judgment amount (This judgment will earn interest at statutory rates, computed from the filing date of the complaint.): \$ _____

The defendant shall pay the judgment in installment payments of \$ _____ each _____ starting _____ until the judgment is paid in full. The plaintiff shall not issue a periodic garnishment as long as payment is made.

Other conditions, if any:

Approved as to form, notice of entry waived.

IT IS ORDERED that this judgment is granted.

This judgment resolves the last pending claim and closes the case unless checked here.

Judgment date _____ Judge/Court clerk _____ Bar no. _____

Plaintiff/Attorney _____ Defendant/Attorney _____

Judgment has been entered and will be final unless **a motion for new trial or an appeal is filed within 21 days after the judgment date.**

STATUTORY INTEREST

The judgment interest accrued from the filing of the complaint to judgment is \$ _____ and is based on:

(If additional rates apply, attach a separate sheet.)

- the statutory rate of _____ % from _____ to _____ .
- the statutory 6-month rate(s) of _____ % from _____ to _____ and _____ % from _____ to _____ .

CERTIFICATE OF MAILING I certify that on this date I served a copy of this judgment on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date _____ Signature _____

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	ORDER REGARDING INSTALLMENT PAYMENTS <input type="checkbox"/> AMENDED	CASE NO.
---	--	-----------------

Court address _____ Court telephone no. _____

Plaintiff's name (judgment creditor), address, and telephone no.

v

Defendant' name (judgment debtor), address, and telephone no.

Plaintiff's attorney, bar no., address, and telephone no.

Garnishee's name, address, and telephone no.

Date of judgment: _____ Amount of judgment (including costs): \$ _____

1. The defendant filed a motion for installment payments with this court on _____ .
Date

2. The court entered a writ of garnishment for periodic payments on _____ .
Date

IT IS ORDERED:

3. The motion for installment payments is denied for the reasons stated on the record or for the following reasons:

4. The defendant shall pay the judgment in installments as follows:

\$ _____ every week two weeks month starting _____ .

No writ of garnishment on this judgment shall issue for wages/personal work and labor until further order of the court.

5. The writ for periodic payments issued on _____ is suspended and the garnishee is ordered to
Date

discontinue withholding amounts under the writ unless otherwise ordered by the court. Any funds deposited with the court or held by the garnishee before the date of this order shall be paid and mailed to the plaintiff/plaintiff's attorney.

6. **FURTHER ORDERS:** If the defendant fails to make the above payments, the plaintiff may file a motion to set this order aside. Copies of the motion must be served by first-class mail to the defendant's last-known address. An order setting aside the installment payments will be entered 14 days from the date of mailing of the motion to set aside installment payments unless the defendant, within that time, requests a hearing.

Date

Judge Bar no.

Instructions to Defendant: Do not serve the order on the garnishee if the motion for installment payments is denied.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	NOTICE OF INTENT TO ESCHEAT UNCLAIMED PERSONAL PROPERTY	CASE NO.
--	--	-----------------

Court address

Court telephone no.

TO:

Court Use Note: This notice **must** be sent not less than 60 days or more than 365 days before filing a report with the State Treasurer regarding the property **if the property has a value of \$50 or more. MCL 567.238(5).**

The court holds unclaimed personal property to which you are entitled, as described below.

Description	Date received	Receipt Number

- Check number _____ was written and sent to you on _____ .
Date
- The check was returned to the court by the postal service.
- The check has not been cashed.
- Other: _____

If you do not claim this property by contacting the court by _____ , it will be deposited
Date
with the State Treasurer. **Bring this form with you when you come to claim your property.**

After that, you must claim your property from:

Michigan Department of Treasury
Unclaimed Property Division
P.O. Box 30756
Lansing, Michigan 48909
Telephone: (517) 636-5320
www.michigan.gov/unclaimedproperty

Date

Deputy Clerk

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Deputy Clerk

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	NOTICE OF INTENT TO DISMISS FOR NO PROGRESS	CASE NO.
---	---	-----------------

Court address

Court telephone no.

Plaintiff's/Petitioner's name, address, and telephone no.
Plaintiff's/Petitioner's attorney, bar no., address, and telephone no.

v

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

Probate In the matter of _____

TO: All attorneys of record and unrepresented parties.

You are notified that:

1. No steps or proceedings appear to have been taken in this matter in 91 days.
2. The action will be dismissed for lack of progress 28 days after the date of this notice unless the parties show that progress is being made or that the failure to prosecute is not because of the fault or lack of reasonable diligence of the party seeking affirmative relief.

Date

Clerk/Register

NOTE: For domestic relations cases, if you applied for Title IV-D child support services and your case is dismissed, your services will stop 60 days after the date of this notice. If you do not want your Title IV-D services to stop and you need child support services, please contact the Office of Child Support at 1-866-540-0008.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	OBJECTIONS TO GARNISHMENT AND NOTICE OF HEARING	CASE NO.
---	--	-----------------

Court address

Court telephone no.

Plaintiff's name, address, and telephone no. (judgment creditor)

Defendant's name, address, and telephone no. (judgment debtor)

v

Plaintiff's attorney, bar no., address, and telephone no.

Garnishee's name and address

OBJECTIONS TO GARNISHMENT

I object to the writ of garnishment issued on _____ and request a hearing because
Date

- a. the funds or property are exempt (protected) from garnishment by law.
- b. of bankruptcy proceedings. Case No: _____
- c. I have an installment payment order, issued on _____ . Court: _____ Case No: _____
- d. the maximum amount permitted by law is already being withheld by another court order.
- e. the judgment has been paid.
- f. the writ was not properly issued or is otherwise invalid because _____

I was served with a copy of a writ of garnishment on _____ .
Date

Signature of defendant

To be completed by the court.

NOTICE OF HEARING ON OBJECTIONS

1. A hearing will be held on _____ at _____ at _____
Date Time Location

_____ before Hon. _____ .

- 2. The defendant and plaintiff are required to appear.
- 3. The garnishee is is not required to appear.
- 4. a. Objections were filed within 14 days of the defendant being served with the writ of garnishment. The garnishee shall continue to withhold funds but shall **not** release withheld funds until further order of the court.
- b. Objections were filed 14 days or more after the defendant was served with the writ of garnishment. The garnishee shall continue to withhold and release funds unless otherwise ordered by the court.

Deputy court clerk

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this objection and notice on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Defendant's signature/District court clerk

Instructions for Filing and Serving "Objections to Garnishment" (Form MC 49)

If you received a writ of garnishment (form MC 12, MC 13, or MC 52), you can object to that garnishment only if:

- your money is exempt (protected) from garnishment by law (see the list of exempt funds on the back of your writ of garnishment form),
- you filed for bankruptcy and those proceedings are pending or the debt has been discharged,
- you have an installment payment order signed by a judge (form MC 15a),
- the maximum amount of money that can be garnished by law is already being withheld by another court order,
- you already paid the judgment in full,
- the garnishment was not properly issued (for example, it was issued on false information) or the garnishment is invalid (for example, the writ was served on the garnishee after the service deadline, the interest, costs, or judgment amount are inaccurate).

You cannot use this form to challenge the judgment or because you are unable to pay the judgment.

1. How do I file an Objection?

You file an objection by completing the form and filing it with the same court that signed the writ of garnishment. **There is no cost for filing an objection except in probate court cases.**

2. Fill out the Objection form.

Write in the court number, case number, the court address and telephone number, and the names, addresses, and telephone numbers of the plaintiff and the defendant exactly as they are on the writ of garnishment.

Write in the date the garnishment was issued (see the lower left-hand corner of the writ of garnishment). Check the box that states the reason you are objecting to the garnishment. If there is more than one reason, check all that apply. Write in the date that you were served (the date you received) a copy of the writ garnishment.

Write in the date you complete the form and sign your name.

3. Make four copies of the completed objection form.

4. File the Objection with the court.

File all four copies of your objection with the court in person or by first-class mail. If you mail the objection, include a postage-paid and self-addressed envelope so that the court can return to you three copies with the Notice of Hearing completed.

5. Serve the Objection.

If your case is in the district court, the court will serve the objection and will return one copy to you.

If your case is in the circuit court, when you get the three remaining copies of the objection with the Notice of Hearing completed, serve a copy on the plaintiff and a copy on the garnishee by first-class mail. If the plaintiff has an attorney, serve the objection on the attorney instead of the plaintiff. Complete the Certificate of Mailing on the bottom of your copy of the form. Make a copy of this and file it with the court. You can do this either in person or by first-class mail. Keep your copy for yourself.

Bring all documents to the hearing to support the objections that you checked on the objection form.

For more information on objections or preparing for a hearing generally, see MichiganLegalHelp.org or scan the code to the right with your smartphone.



STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	INFORMATION FELONY	CASE NO. DISTRICT CIRCUIT
---	-------------------------------	---

District Court ORI: MI-

Circuit Court ORI: MI-

Defendant's name and address THE PEOPLE OF THE STATE OF MICHIGAN v				Victim or complainant	
Codefendant(s) (if known)				Complaining witness	
Date: On or about				Date: On or about	
City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	Defendant DOB
Police agency report no.	Charge			Maximum penalty	
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type	Defendant DLN	

Witnesses

STATE OF MICHIGAN, COUNTY OF _____ ;
IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN: The prosecuting attorney for this county appears before the court and informs the court that on the date and at the location described, the defendant:

and against the peace and dignity of the State of Michigan.

Prosecuting Attorney

By: _____

Date

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	COMPLAINT FELONY	CASE NO. DISTRICT CIRCUIT
---	-----------------------------	---

District Court ORI: MI-

Circuit Court ORI: MI-

Defendant's name and address THE PEOPLE OF THE STATE OF MICHIGAN v				Victim or complainant	
Codefendant(s) (if known)				Complaining witness	
Date: On or about				Date: On or about	
City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	Defendant DOB
Police agency report no.	Charge			Maximum penalty	
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type	Defendant DLN	

Witnesses

STATE OF MICHIGAN, COUNTY OF _____ .

The complaining witness says that on the date and at the location described, the defendant, contrary to law,

The complaining witness asks that defendant be apprehended and dealt with according to law.

Warrant authorized on _____ by:
Date

Prosecuting official

Security for costs posted

Complaining witness signature

Subscribed and sworn to before me on _____ .
Date

Judge/Magistrate/Clerk Bar no.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	WARRANT FELONY	CASE NO. DISTRICT CIRCUIT
---	---------------------------	---

District Court ORI: MI-

Circuit Court ORI: MI-

Defendant's name and address				Victim or complainant	
THE PEOPLE OF THE STATE OF MICHIGAN v					
				Complaining witness	
Codefendant(s) (if known)				Date: On or about	
City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	Defendant DOB
Police agency report no.	Charge			Maximum penalty	
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type	Defendant DLN	
Witnesses					

STATE OF MICHIGAN, COUNTY OF _____ .

To any peace officer or court officer authorized to make arrest: The complaining witness has filed a sworn complaint in this court stating that on the date and the location described, the defendant, contrary to law,

Upon examination of the complaining witness, I find that the offense charged was committed and that there is probable cause to believe that defendant committed the offense. THEREFORE, IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN,

- a. I order you to arrest and bring defendant before the _____ District Court immediately.
- b. I order you to bring defendant before the _____ District Court.
- c. The defendant may be released before arraignment if \$ _____ is posted as interim bail by _____ .
Date

Date

Judge/Magistrate

Bar no.

See return on reverse side.

RETURN

As ordered in this warrant, the defendant was arrested on _____ at _____
Date Time

at _____ .
Place of arrest

Date

Peace officer

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	BIND OVER/TRANSFER AFTER PRELIMINARY EXAMINATION FELONY	CASE NO. DISTRICT CIRCUIT
---	--	---

District Court ORI: MI-

Circuit Court ORI: MI-

Defendant's name and address THE PEOPLE OF THE STATE OF MICHIGAN v				Victim or complainant	
Codefendant(s) (if known)				Complaining witness	
Date: On or about				Date: On or about	
City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	Defendant DOB
Police agency report no.	Charge			Maximum penalty	
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type	Defendant DLN	

Date: _____

District judge: _____ Bar no. _____

Reporter/Recorder	Cert. no.
-------------------	-----------

Represented by counsel	Bar no.
------------------------	---------

EXAMINATION WAIVER

1. I, the defendant, understand:
 - a. I have a right to employ an attorney.
 - b. I may request a court-appointed attorney if I am financially unable to employ one.
 - c. I have a right to a preliminary examination where it must be shown that a crime was committed and probable cause exists to charge me with the crime.
2. I voluntarily waive my right to a preliminary examination and understand that I will be bound over to circuit court on the charges in the complaint and warrant (or as amended).

Defendant attorney _____ Bar no. _____ Defendant _____

I consent to this waiver: _____ Prosecuting attorney _____ Bar no. _____

ADULT BINDOVER

3. Examination was waived on _____ .
Date _____
4. Examination was held on _____ and it was found that probable cause exists to believe both that an offense not cognizable by the district court has been committed and that the defendant committed the offense.
5. The defendant is bound over to circuit court to appear on _____ at _____ .
Date _____ Time _____
 - on the charge(s) in the complaint.
 - on the amended charge(s) of _____

_____ MCL/PACC Code _____ .

6. Bond is set in the amount of \$ _____ . Type of bond: _____ Posted

_____ Date _____ Judge _____ Bar no. _____

Certification of transmittal and bindover/transfer for juvenile are printed on other side.

JUVENILE BINDOVER/TRANSFER

- 3. Examination was waived on _____ .
Date
- 4. Examination was held on _____ and it was found that
Date
 - there is probable cause that a life offense occurred and there is probable cause that the juvenile committed the life offense.
 - there is no probable cause that a life offense occurred or there is no probable cause that the juvenile committed the life offense, but some other offense occurred that if committed by an adult would constitute a crime, and there is probable cause to believe the juvenile committed that offense.
- 5. The juvenile is bound over to circuit court criminal division to appear on _____ at _____ .
Date Time
 - on the charge(s) in the complaint.
 - on the amended charge(s) of __________ MCL/PACC Code _____ .
- 6. This case is transferred to the family division of the circuit court for further proceedings
 - immediately.
 - on _____ at _____ .
Date Time
- 7. Bond is set in the amount of \$ _____ . Type of bond: _____ Posted

Date

Judge Bar no.

MCL 766.14(2), MCR 6.911

CERTIFICATION

I certify that on this date I have transmitted to the _____ circuit court criminal division the prosecutor's authorization for a warrant application, the complaint, a copy of the register of actions, and any recognizances received.

Date

Court clerk

NOTE: Send a copy of this bindover to the Michigan State Police Criminal Justice Information Center.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	WRIT OF HABEAS CORPUS	CASE NO.
---	------------------------------	-----------------

Court address _____ Court telephone no. _____

IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN:

TO: _____, the agency or person having custody of

Name _____ I.D. no. _____ Date of birth _____

To bring prisoner to court in the case of:
People of
v

To inquire into detention/custody of:

IT IS ORDERED:

1. Answer this writ, stating the authority under which you restrain the prisoner. exercise custody over the minor child. File your answer with the court judge by _____
Date _____

2. Deliver the person named in this writ into the custody of _____
Name/Title/Agency
for: the prosecution of _____, felony. misdemeanor.
Charge and MCL citation or PACCC code _____

Specify purpose (witness testimony, etc.). _____

Immediately after the prisoner completes his/her appearance, the prisoner shall be returned to your custody.

3. Bring the person named in this writ before the Honorable _____
Name _____ Bar no. _____
at _____, on _____ at _____
Location of court _____ Date _____ Time _____
Bring this writ with you.

4. Produce the prisoner via compatible two-way interactive video technology for the purpose indicated above on _____
Date _____ at _____
Time _____

5. Fees are allowed in the amount of \$ _____.

Date _____ Judge _____ Bar no. _____

PROOF OF SERVICE

STATE OF MICHIGAN, COUNTY OF _____

I certify that on _____ at _____, I personally served the original writ of habeas
Date _____ Time _____
corpus on _____
Name _____

Date _____ Signature _____

WRIT OF HABEAS CORPUS

Case No. _____

Required only under MCR 3.303

ANSWER

STATE OF MICHIGAN, COUNTY OF _____

I, _____, state:
Name

1. I do not have _____ under my custody, power, or restraint.
Person name in writ

2. On _____ by authority of _____,
Date
_____ was released.
 transferred to _____ (exhibits attached).
Location

3. I have _____ under my custody, power, or restraint under a
Person named in writ

- warrant charging the prisoner with the offense of _____
- commitment
- other: _____

issued by _____ . A copy of the document is attached and the original
Name
will be produced at the hearing.

I declare that the statements above are true to the best of my information, knowledge, and belief.

Date

Signature

Title

When required by MCR 3.303(L)(2)

NOTICE TO PROSECUTING ATTORNEY

TO: The prosecuting attorney of _____ County

You are notified that the annexed writ of habeas corpus has been issued. _____
is believed to have custody of the prisoner. Name/Title/Agency

Date

Prisoner Attorney/Bar no.

Address

City, state, zip Telephone no.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	ORDER FOR COMPETENCY EXAMINATION	CASE NO.
---	---	-----------------

ORI MI-	Court address	Court telephone no.
------------	---------------	---------------------

THE PEOPLE OF	<input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ _____
---------------	---

v

Defendant's name, address, and telephone no.		
CTN/TCN	SID	DOB

Count	CRIME	CHARGE CODE(S) MCL citation/PACC Code

Upon the showing in this case that the defendant may be incompetent to stand trial, **IT IS ORDERED:**

1. The defendant shall undergo an examination, relating to the issue of competency to stand trial, by:
 - the Center for Forensic Psychiatry.
 - other:

A written report meeting the statutory requirements shall be submitted to this court within 60 days from the date of this order with copies submitted to the prosecuting official and defense attorney, whose names and addresses are:

Prosecuting official's name, address, bar no., and telephone no.

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

2. If the defendant is on bond, s/he shall appear for examination at the places and times established by the examining facility. If the defendant, after being notified, fails to appear for examination, the court may order detention at a diagnostic facility for examination without hearing. This detention shall end upon completion of the examination.
3. If the defendant is under detention, the facility may perform the examination in jail or may notify the sheriff to transport the defendant to the facility for examination, and the sheriff shall return the defendant to the jail upon completion of the examination.
4. Defense counsel shall be available for consultation with facility personnel.
5. The prosecuting official shall immediately provide police investigation reports and criminal history to the facility.

6. Other:

_____ Date

_____ Judge _____ Bar no.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	JUDGMENT OF SENTENCE <input type="checkbox"/> COMMITMENT TO JAIL	CASE NO.
---	---	-----------------

ORI MI- Court address Court telephone no.

Police Report No. _____

THE PEOPLE OF The State of Michigan

v

Defendant's name, address, and telephone no. _____

CTN/TCN	SID	DOB
---------	-----	-----

THE COURT FINDS:

1. The defendant was found guilty on _____ of the crime(s) stated below:
Date

Count	CONVICTED BY			DISMISSED BY*	CRIME	CHARGE CODE(S) MCL citation/PACC Code
	Plea*	Court	Jury			

*Insert "G" for guilty plea, "NC" for nolo contendere, or "MI" for guilty but mentally ill, "D" for dismissed by court, or "NP" for dismissed by prosecutor/plaintiff.

2. Defendant represented by an attorney: _____
 advised of right to counsel and appointed counsel and knowingly, intelligently, and voluntarily waived that right.
3. Conviction reportable to Secretary of State**. Defendant's driver's license number is _____.
4. Sanctions are reportable to State Police**. Revoked. Suspended _____ days. Restricted _____ days.
5. HIV testing and sex offender registration are completed. ** (see back)
6. The defendant has been fingerprinted according to MCL 28.243.
7. A DNA sample is already on file with the Michigan State Police from a previous case. No assessment is required.

IT IS ORDERED:

8. Probation is revoked.
9. Deferred status is revoked. HYTA status is revoked.
10. The defendant is sentenced to jail as follows: Report at _____ m.

Count	Date Sentence Begins	Sentenced		Credited		To Be Served		Release Authorized for the Following Purpose	Release Period	
		Mos.	Days	Mos.	Days	Mos.	Days		From	To
								<input type="checkbox"/> Upon payment of fine and costs <input type="checkbox"/> To work or seek work <input type="checkbox"/> For attendance at school <input type="checkbox"/> For medical treatment..... <input type="checkbox"/> Other: _____		

11. The defendant shall pay:

State Minimum	Crime Victim	Restitution	DNA Assess.	Court Costs	Attorney Fees	Fine	Other Costs	Total
\$	\$	\$	\$	\$	\$	\$	\$	\$

The due date for payment is _____. Fine, costs, and fees not paid within 56 days of the due date are subject to a 20% late penalty on the amount owed. Only the fine and some costs may be satisfied by serving time in jail.

The defendant shall serve _____ days in jail for failure to pay on time, as part of a conditional sentence. Prior to enforcement of jail time for failing to pay, the court must determine the defendant's ability to pay.

12. The defendant shall be placed on probation for _____ months and abide by the terms of probation. (See separate order.)

13. The defendant shall complete the following rehabilitative services.

Alcohol Highway Safety Education Treatment (outpatient, inpatient, residential, mental health).

Specify:

14. The vehicle used in the offense shall be immobilized or forfeited. (See separate order.)

15. Other:

(SEAL)

Date _____

Judge/Magistrate _____

Bar no. _____



Convictions are reportable to the Secretary of State under:

- MCL 257.625(21)(a)
- MCL 257.732
- MCL 324.80131
- MCL 324.81134(12)
- MCL 324.81135(7)
- MCL 324.82157
- MCL 333.7408a(11)

Sanctions are reportable to the State Police under:

- MCL 333.7408a(11) and MCL 333.7408a(12)(b), including sentences for imprisonment under 90 days
- MCL 257.625(21)(b)

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	RECALL OF WARRANT/ ORDER TO APPREHEND AND REMOVAL FROM LEIN	CASE NO.
--	--	-----------------

ORI Court address Court telephone no.

MI- **Completely Revised**

Issue date of warrant/order to apprehend	Charge	Date of offense
--	--------	-----------------

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ _____ _____	v
---	---

Defendant's/Respondent's/Juvenile's name, address, and tel. no.			
CTN/TCN	SID	DOB	
DLN		Race	Sex

IT IS ORDERED:

1. The warrant/order to apprehend, identified above, be returned immediately to this court.
2. The record of this warrant/order to apprehend be removed immediately from LEIN files.

Reason: _____
(optional)

Date Judge/Clerk/Register Bar no.

Complete this section if your court does not recall its own warrants in LEIN.

NOTICE OF RECALL

Contact the law enforcement agency immediately after the person appears in court on the warrant/order to apprehend. Advise the law enforcement agency to recall the warrant/order to apprehend. Unless you have an established protocol with your law enforcement agency to receive notice of this recall by e-mail or fax, you must make contact by phone.

Use the space provided below to indicate the date, time, and name or method of contact.

Date Time Name of person called/E-mail address/Fax no.

TO: _____
Law enforcement agency

Immediately after being notified of this recall, remove the LEIN entry in this case and complete and return the Certificate of Removal from LEIN to the court.

CERTIFICATE OF REMOVAL FROM LEIN

I certify that the LEIN entry in this case has been removed from LEIN files.

Date Signature of court/law enforcement representative

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	REQUEST FOR COURT-APPOINTED ATTORNEY AND ORDER	CASE NO.
---	---	-----------------

ORI _____ Court address _____ Court telephone no. _____
MI- _____

THE PEOPLE OF The State of Michigan

v

Defendant's name, address, and telephone no.

CTN	SID	DOB
-----	-----	-----

REQUEST

The defendant requests a court-appointed attorney and submits the following information.

<p>1. CHARGE <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony <input type="checkbox"/> Paternity <input type="checkbox"/> Bond posted</p> <p>Next hearing: _____ <small>Date</small></p> <p>Bail amount: \$ _____</p>	<p>2. RESIDENCE <input type="checkbox"/> Live with parents <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Room/Board</p> <p>3. MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Dependents: _____ <input type="checkbox"/> Married <input type="checkbox"/> Separated <small>Number</small></p>
<p>4. INCOME Employer name and address _____</p> <p>Other Income State monthly amount and source (DHHS, VA, rent, pensions, spouse, unemployment, etc.). _____</p>	<p>Length of employment _____</p> <p>Average take-home pay \$ _____ <input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> every two weeks</p>
<p>5. ASSETS* State value of car, home, bank deposits, inmate accounts, bonds, stocks, etc. _____</p>	
<p>6. OBLIGATIONS* Itemize monthly rent, installment payments, mortgage payments, child support, etc. _____</p>	
<p>7. CONTRIBUTION TOWARD ATTORNEY COSTS</p> <p>I understand that I may be required to contribute to the cost of an attorney.</p> <p>Date: _____ Signature: _____</p>	

*Use other side for additional information/comments.

ORDER

- 8. _____ is appointed to represent the defendant.
Name Bar no.
- 9. The petition is denied because: _____



Date _____ Judge _____ Bar no. _____

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT	APPLICATION TO SET ASIDE CONVICTION	CASE NO.
---	--	-----------------

ORI _____ Court address _____ Court telephone no. _____
MI- _____
Police Report No. _____

THE PEOPLE OF

The State of Michigan

v

Defendant's name, address, and telephone no.

CTN/TCN	SID	DOB
---------	-----	-----

Defendant's attorney, bar no., address, and telephone no.

1. On _____ I was convicted of _____. A certified copy of the conviction is attached.
Date Offense
2. I **request** that the court issue an order to set aside the above conviction as provided by law. I consent to use of the nonpublic record created by MCL 780.623 to the extent authorized by MCL 780.623.
3. No other application has been filed to set aside this conviction. **OR**
 An application was previously filed to set aside this conviction on _____. The application was disposed
Date
of as follows: _____.
4. No other application has been filed to set aside another conviction. **OR**
 An application was previously filed in this court the _____ Court to set aside a
conviction for _____, in addition to the conviction in item 1. The application was disposed
of as follows: _____.
5. At least five years have passed since sentence was imposed or discharge from imprisonment, probation, or parole for this conviction, whichever is later.
6. I have not had any convictions deferred and dismissed. I have had the following conviction(s) deferred and dismissed:
_____.
7. There are no other criminal charges pending against me. There are criminal charges pending against me in the
_____ Court, case number _____.
8. I have not been convicted of more than one felony and two misdemeanors as defined in MCL 780.621.

Applicant Signature

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Deputy clerk/Notary public

Notary public, State of Michigan, County of _____

**APPLICATION TO
SET ASIDE CONVICTION**

CASE NO: _____

The hearing cannot be held until the court receives the Michigan State Police report required by MCL 780.621(9).

NOTICE OF HEARING

TO: Michigan Attorney General and _____
Prosecuting official

A hearing will be held on the above application to set aside conviction on _____ at _____
Date Time
at _____ before _____
Location Judge Bar no.

PROOF OF SERVICE

I certify that copies of this application, certified record of conviction, and notice of hearing were served on the

prosecuting official on _____ by first-class mail addressed to the last-known address.
Date

Attorney General on _____ by first-class mail addressed to the last-known address.
Date

I certify that copies of this application, certified record of conviction, and the fingerprint card, accompanied by the required fee, were served on the Michigan State Police on _____ by first-class mail addressed to the last-known address.
Date

Date

Applicant/Attorney signature

INSTRUCTIONS:

1. Determine whether you are eligible to apply to have your conviction set aside according to MCL 780.621. You must complete a separate application for each conviction if you are applying to have more than one conviction set aside.
2. Find out the exact date of conviction and the charge from the court. Get a certified copy of the conviction.
3. Swear to the truth of the statements in this application and then sign it in the presence of the court clerk or a notary public.
4. Make four copies of all attachments and this application. Take all copies to the court clerk.
5. Depending on local practice, the clerk of the court may set a hearing date at the time of filing. If a hearing date is set at the time of filing, the clerk of the court will complete the Notice of Hearing.
6. Go to the local law enforcement agency for a fingerprint card and get fingerprinted on the applicant card (R 1-8). There may be a fee for fingerprinting. Fill out the card completely.
7. Make out a money order or check to the State of Michigan for the application. The application fee is \$50.00. This fee is sent with the application packet to the Michigan State Police for processing.
8. Mail a copy of the application packet, application fee, and the fingerprint card to the Michigan State Police by first-class mail to Michigan State Police, Criminal Justice Information Center - Criminal History, PO Box 30266, Lansing, Michigan 48909.
9. Mail a copy of the application packet to the Attorney General of the State of Michigan by first-class mail to Office of the Attorney General, Criminal Appellate Division, PO Box 30217, Lansing, Michigan 48909.
10. Mail a copy of the application packet to the correct prosecuting official **where the conviction occurred** (county, city, or township) by first-class mail. **See www.michiganprosecutor.org/about-us-menu/prosecutor-directory for the addresses of county prosecutors.**
11. On both copies of the application, fill in the Proof of Service on the back of the form. After you fill out and sign the Proof of Service, mail or take one of the remaining application packets with the completed Proof of Service to the court. Keep the other copy of the application packet for your records.

For additional instructions, visit michiganlegalhelp.org.

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT	PRETRIAL RELEASE ORDER <input type="checkbox"/> AMENDED	CASE NO. <input type="checkbox"/> Bound Over from District Court District Case No: _____
---	--	---

ORI _____ Court address _____ Court telephone no. _____
MI- _____

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Juvenile In the matter of _____	v	Defendant's name, address, and telephone no. _____ Date of birth _____ CTN/TCN _____
--	----------	--

Date of arrest	Type of offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony	Arresting Agency	Agency file no.
Offense(s)		Statute/ordinance citation(s)	
Purpose of next appearance		Time of appearance	Date of appearance
Place of appearance <input type="checkbox"/> At the court address above <input type="checkbox"/> Other: _____			
TYPE OF BOND: <input type="checkbox"/> Personal recognizance <input type="checkbox"/> Cash/Surety <input type="checkbox"/> Cash/Surety/10% Cash <input type="checkbox"/> Real Property* <input type="checkbox"/> *Proof of value and interest in real property is required.		Full bail amount \$ _____	Bond set by Judge/Magistrate/Referee _____

1. a. Release on personal recognizance shall be ordered as required by MCR 6.106(C).
 b. Release on personal recognizance will not reasonably ensure the defendant's appearance. public safety.
 2. Under 18 USC 922(g)(8), the court found, at a hearing, that the defendant/juvenile represents a credible threat to the physical safety of one or more persons as defined in 18 USC 922(g)(8) and 18 USC 921(a)(32) and named in item 4. **Needed for NCIC.

IT IS ORDERED:

3. The defendant/juvenile shall post a new bond (MC 241). Any additional conditions are specified in item 4 and in the bond.
 4. Conditions to be specified in the bond are: _____
 (see other side for list of conditions) Indicate conditions by item number. Include any specific details.

 5. The sheriff custodial agency/facility _____ shall hold the defendant/juvenile named above in its care and custody until bond is posted and the conditions are agreed to as specified in item 4 and in the bond. While in custody, the defendant/juvenile shall not contact (specify name(s) and manner of contact): _____
 The sheriff or director or designee of the custodial facility is authorized to obtain and consent to routine, nonsurgical medical and dental care for the juvenile and emergency medical, dental, and surgical treatment of the juvenile.
The defendant/juvenile shall be brought to all court appearances while in custody or as otherwise ordered.
 6. The previously posted bond is continued.
 7. The previously posted bond is revoked, conditions of release under MCL 765.6b or 780.582a are cancelled, and LEIN entry shall be removed. Bond is forfeited.

Date

Judge/Magistrate/Referee

Bar no.



STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT	PRETRIAL RELEASE ORDER <input type="checkbox"/> AMENDED	CASE NO. <input type="checkbox"/> Bound Over from District Court District Case No: _____
---	--	---

ORI MI-	Court address	Court telephone no.
------------	---------------	---------------------

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Juvenile In the matter of _____	v	Defendant's name, address, and telephone no. Date of birth _____ CTN/TCN _____
--	----------	---

Date of arrest	Type of offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony	Arresting Agency	Agency file no.
Offense(s)		Statute/ordinance citation(s)	
Purpose of next appearance		Time of appearance	Date of appearance
Place of appearance <input type="checkbox"/> At the court address above <input type="checkbox"/> Other: _____			

TYPE OF BOND: <input type="checkbox"/> Personal recognizance <input type="checkbox"/> Cash/Surety <input type="checkbox"/> Cash/Surety/10% Cash <input type="checkbox"/> Real Property* <input type="checkbox"/> *Proof of value and interest in real property is required.	Full bail amount \$ _____	Bond set by Judge/Magistrate/Referee
--	------------------------------	--------------------------------------

1. a. Release on personal recognizance shall be ordered as required by MCR 6.106(C).
 b. Release on personal recognizance will not reasonably ensure the defendant's appearance. public safety.
2. Under 18 USC 922(g)(8), the court found, at a hearing, that the defendant/juvenile represents a credible threat to the physical safety of one or more persons as defined in 18 USC 922(g)(8) and 18 USC 921(a)(32) and named in item 4. **Needed for NCIC.

IT IS ORDERED:

3. The defendant/juvenile shall post a new bond (MC 241). Any additional conditions are specified in item 4 and in the bond.

4. Conditions to be specified in the bond are: _____
 (see other side for list of conditions) Indicate conditions by item number. Include any specific details.

5. The sheriff custodial agency/facility _____ shall hold the defendant/juvenile named above in its care and custody until bond is posted and the conditions are agreed to as specified in item 4 and in the bond. While in custody, the defendant/juvenile shall not contact (specify name(s) and manner of contact): _____

The sheriff or director or designee of the custodial facility is authorized to obtain and consent to routine, nonsurgical medical and dental care for the juvenile and emergency medical, dental, and surgical treatment of the juvenile.

The defendant/juvenile shall be brought to all court appearances while in custody or as otherwise ordered.

6. The previously posted bond is continued.
7. The previously posted bond is revoked, conditions of release under MCL 765.6b or 780.582a are cancelled, and LEIN entry shall be removed. Bond is forfeited.

Date Judge/Magistrate/Referee Bar no.

Scheduled court appearances:
Use additional space for scheduling adjournment dates

DATE	TIME	COURT LOCATION	CLERK

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT	PRETRIAL RELEASE ORDER <input type="checkbox"/> AMENDED	CASE NO. <input type="checkbox"/> Bound Over from District Court District Case No: _____
---	--	---

ORI _____ Court address _____ Court telephone no. _____
MI- _____

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Juvenile In the matter of _____	v	Defendant's name, address, and telephone no. Date of birth _____ CTN/TCN _____
--	----------	---

Date of arrest	Type of offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony	Arresting Agency	Agency file no.
Offense(s)		Statute/ordinance citation(s)	
Purpose of next appearance		Time of appearance	Date of appearance
Place of appearance <input type="checkbox"/> At the court address above <input type="checkbox"/> Other: _____			
TYPE OF BOND: <input type="checkbox"/> Personal recognizance <input type="checkbox"/> Cash/Surety <input type="checkbox"/> Cash/Surety/10% Cash <input type="checkbox"/> Real Property* <input type="checkbox"/> *Proof of value and interest in real property is required.		Full bail amount \$ _____	Bond set by Judge/Magistrate/Referee

1. a. Release on personal recognizance shall be ordered as required by MCR 6.106(C).
 b. Release on personal recognizance will not reasonably ensure the defendant's appearance. public safety.
 2. Under 18 USC 922(g)(8), the court found, at a hearing, that the defendant/juvenile represents a credible threat to the physical safety of one or more persons as defined in 18 USC 922(g)(8) and 18 USC 921(a)(32) and named in item 4. **Needed for NCIC.

IT IS ORDERED:

3. The defendant/juvenile shall post a new bond (MC 241). Any additional conditions are specified in item 4 and in the bond.
 4. Conditions to be specified in the bond are: _____
 (see other side for list of conditions) Indicate conditions by item number. Include any specific details.

5. The sheriff custodial agency/facility _____ shall hold the defendant/juvenile named above in its care and custody until bond is posted and the conditions are agreed to as specified in item 4 and in the bond. While in custody, the defendant/juvenile shall not contact (specify name(s) and manner of contact): _____

The sheriff or director or designee of the custodial facility is authorized to obtain and consent to routine, nonsurgical medical and dental care for the juvenile and emergency medical, dental, and surgical treatment of the juvenile.

The defendant/juvenile shall be brought to all court appearances while in custody or as otherwise ordered.

6. The previously posted bond is continued.
 7. The previously posted bond is revoked, conditions of release under MCL 765.6b or 780.582a are cancelled, and LEIN entry shall be removed. Bond is forfeited.

Date Judge/Magistrate/Referee Bar no.

NOTE: Prepare order below only when release is subject to conditions necessary to protect 1 or more named persons under MCL 765.6b or 780.582a or for NCIC.

TO THE LOCAL LAW ENFORCEMENT AUTHORITY:

IT IS ORDERED that the above release order, including the conditions of release, and the following identifying information of the defendant/juvenile must be entered on the LEIN system. The court will notify the local law enforcement agency of any subsequent amendments to or revocation of this order. Amended conditions Amended expiration date

Height	Weight	Race	Sex	Date of birth	Hair color	Eye color	Other identifying information

Effective date of conditions in item 4. Expiration date of order

Date Judge Bar no.

LAW ENFORCEMENT AGENCY COPY

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT	PRETRIAL RELEASE ORDER <input type="checkbox"/> AMENDED	CASE NO. <input type="checkbox"/> Bound Over from District Court District Case No: _____
---	--	---

ORI MI-	Court address	Court telephone no.
------------	---------------	---------------------

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Juvenile In the matter of _____	v	Defendant's name, address, and telephone no. Date of birth _____ CTN/TCN _____
--	----------	---

Date of arrest	Type of offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony	Arresting Agency	Agency file no.
----------------	---	------------------	-----------------

Offense(s)	Statute/ordinance citation(s)
------------	-------------------------------

Purpose of next appearance	Time of appearance	Date of appearance
----------------------------	--------------------	--------------------

Place of appearance
 At the court address above Other: _____

TYPE OF BOND: <input type="checkbox"/> Personal recognizance <input type="checkbox"/> Cash/Surety <input type="checkbox"/> Cash/Surety/10% Cash <input type="checkbox"/> Real Property* <input type="checkbox"/> *Proof of value and interest in real property is required.	Full bail amount \$ _____	Bond set by Judge/Magistrate/Referee
--	------------------------------	--------------------------------------

1. a. Release on personal recognizance shall be ordered as required by MCR 6.106(C).
 b. Release on personal recognizance will not reasonably ensure the defendant's appearance. public safety.
 2. Under 18 USC 922(g)(8), the court found, at a hearing, that the defendant/juvenile represents a credible threat to the physical safety of one or more persons as defined in 18 USC 922(g)(8) and 18 USC 921(a)(32) and named in item 4. **Needed for NCIC.

IT IS ORDERED:

3. The defendant/juvenile shall post a new bond (MC 241). Any additional conditions are specified in item 4 and in the bond.
 4. Conditions to be specified in the bond are: _____
 (see other side for list of conditions) Indicate conditions by item number. Include any specific details.

5. The sheriff custodial agency/facility _____ shall hold the defendant/juvenile named above in **its** care and custody until bond is posted and the conditions are agreed to as specified in item 4 and in the bond. **While in custody, the defendant/juvenile shall not contact (specify name(s) and manner of contact):** _____

The sheriff or director or designee of the custodial facility is authorized to obtain and consent to routine, nonsurgical medical and dental care for the juvenile and emergency medical, dental, and surgical treatment of the juvenile.

The defendant/juvenile shall be brought to all court appearances while in custody or as otherwise ordered.

6. The previously posted bond is continued.
 7. The previously posted bond is revoked, conditions of release under MCL 765.6b or 780.582a are cancelled, and LEIN entry **shall** be removed. Bond is forfeited.

Date _____	Judge/Magistrate/Referee _____	Bar no. _____
------------	--------------------------------	---------------

NOTE: Prepare order below only when release is subject to conditions necessary to protect 1 or more named persons under MCL 765.6b or 780.582a or for NCIC.

TO THE LOCAL LAW ENFORCEMENT AUTHORITY:

IT IS ORDERED that the above release order, including the conditions of release, and the following identifying information of the defendant/juvenile must be entered on the LEIN system. The court will notify the local law enforcement agency of any subsequent amendments to or revocation of this order. Amended conditions Amended expiration date

Height	Weight	Race	Sex	Date of birth	Hair color	Eye color	Other identifying information
--------	--------	------	-----	---------------	------------	-----------	-------------------------------

Effective date of conditions in item 4. _____	Expiration date of order _____
---	--------------------------------

Date _____	Judge _____	Bar no. _____
------------	-------------	---------------

COURT LEIN COPY

OTHER CONDITIONS:

Any of these items which are specified in item 4 of the Pretrial Release Order, must also be specified on the face of the Bond (form MC 241). **The applicable conditions will be identified on the face of the bond by item numbers.** They should be specified in the Pretrial Release Order by item number as well since the same list is used on both forms.

- Item 1. Make reports to a court agency as are specified by the court or the agency.
- Item 2. Not use alcohol or illicitly use any controlled substance.
- Item 3. Participate in a substance abuse testing or monitoring program.
- Item 4. Participate in a specified treatment program for any physical or mental condition, including substance abuse.
- Item 5. Comply with restrictions on personal association, place of residence, place of employment, or travel.
- Item 6. Surrender driver's license or passport.
- Item 7. Comply with a specified curfew.
- Item 8. Continue to seek employment.
- Item 9. Continue or begin an educational program.
- Item 10. Remain in the custody of a responsible member of the community who agrees to monitor the defendant/juvenile and report any violation of any release condition to the court.
- Item 11. Not possess or purchase a firearm or other dangerous weapon.
- Item 12. Not harass, intimidate, beat, molest, wound, stalk, threaten, or engage in other conduct that would place any of the following persons or a child of any of the following persons in reasonable fear of bodily injury: spouse, former spouse, individual with whom defendant has a child in common, resident or former resident of defendant's household.
This item is used for NCIC entry
- Item 13. Not assault, harass, intimidate, beat, molest, wound, or threaten a named person or persons (add name(s) on the face of the bond).
- Item 14. Satisfy any injunctive order made a condition of release.
- Item 15. Not have (or cause any third party to have) any direct or indirect contact with (add name(s) to the face of the bond) and not enter specified premises or areas (add address(es) to the face of the bond).
- Item 16. May go to the residence one time accompanied by peace officer to remove personal belongings.
- Item 17. Comply with any other condition, including the requirement of money bail.
- Item 18. Other.

NOTICE OF FIREARMS RESTRICTION: If item 12 is listed as a condition of the defendant's/juvenile's release, federal and/or state law may prohibit the defendant/juvenile from possessing or purchasing ammunition or a firearm (including a rifle, pistol, or revolver) if the court found, after a hearing at which the defendant/juvenile had notice and an opportunity to participate, that the defendant/juvenile represents a credible threat to the physical safety of the person(s) named in item 4 of this order and/or explicitly prohibited in item 4 of this order the use, attempted use, or threatened use of physical force that would reasonably be expected to cause bodily injury to each of those named persons.

NOTE: As it determines necessary, the court can add any other conditions not listed above or can modify any of those that are. Any changes must also be made to the corresponding items on the Bond (MC 241).

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	CUSTODY ORDER	CASE NO. <input type="checkbox"/> Bound Over from District Court District Case No: _____
---	----------------------	---

ORI MI- _____ Court address New Form _____ Court telephone no. _____

<input type="checkbox"/> The State of Michigan THE PEOPLE OF _____ <input type="checkbox"/> Juvenile In the matter of _____	v	Defendant's/Juvenile's name, address, and telephone no. _____ Date of birth _____ CTN/TCN _____
---	----------	---

Date of arrest	Type of offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Felony	Arresting agency	Agency file no.
Offense(s)		Statute/ordinance citation(s)	
Purpose of next appearance		Time of appearance	Date of appearance
Place of appearance <input type="checkbox"/> At the court address above <input type="checkbox"/> Other: _____			

THE COURT FINDS:

The defendant/juvenile was not released for the following reasons: **Check all applicable reasons and explain the reasons checked**

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> criminal record | <input type="checkbox"/> family ties | <input type="checkbox"/> mental condition | <input type="checkbox"/> reputation - character |
| <input type="checkbox"/> employment | <input type="checkbox"/> history of substance/addiction | <input type="checkbox"/> pending charges | <input type="checkbox"/> residence, length |
| <input type="checkbox"/> failure to appear | <input type="checkbox"/> no one to vouch for reliability | <input type="checkbox"/> probation/parole | <input type="checkbox"/> serious offense |
| <input type="checkbox"/> danger to community | <input type="checkbox"/> other reasons: _____ | | |

IT IS ORDERED:

1. The sheriff custodial agency/facility _____ shall continue to hold the defendant/juvenile named above in its care and custody until further order of the court.
2. Conditions of custody are _____
3. The sheriff or director or designee of the custodial facility is authorized to obtain and consent to routine, nonsurgical medical and dental care for the juvenile and emergency medical, dental, and surgical treatment of the juvenile.
4. The defendant/juvenile shall be brought to all court appearances while in custody or as otherwise ordered.
5. The previously posted bond is revoked, conditions of release under MCL 765.6b or 780.582a are cancelled, and LEIN entry shall be removed. Bond is forfeited.

Date Judge/Magistrate/Referee Bar no.

Scheduled court appearances: Use additional space for scheduling adjournment dates

DATE	TIME	COURT LOCATION	CLERK

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	MOTION AND SUMMONS REGARDING PROBATION VIOLATION	CASE NO.
---	---	-----------------

ORI _____ Court address _____ Court telephone no. _____
MI- _____

Police Report No.

THE PEOPLE OF _____ <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____	v
---	---

Defendant's name, address, and telephone no.		
CTN/TCN	SID	DOB

I, _____, Name of probation officer (type or print), allege that the probationer has violated the terms of his/her probation as follows:

I REQUEST that the court compel the probationer to appear **at** a hearing on the charges in this motion.

Date Signature of probation officer

SUMMONS

TO DEFENDANT, **IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN:**

You are ordered to appear in court

at _____
 the above address

on _____ at _____ for arraignment on the alleged probation violation.
Date Time

Failure to appear at the stated time and place may subject you to arrest.

Date Judge Bar no.

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date Signature

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	SUMMONS Criminal	CASE NO. DISTRICT CIRCUIT
---	-----------------------------	---

ORI MI-	Court address	Court telephone no.
--------------------	---------------	---------------------

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ v Defendant's name and address	Victim or complainant <hr/> Complaining witness
---	--

Codefendant(s) (if known)	Date: On or about
----------------------------------	-------------------

City/Twp./Village	County in Michigan	Defendant CTN	Defendant SID	Defendant DOB
-------------------	--------------------	---------------	---------------	---------------

Police agency report no.	Charge	Maximum penalty
--------------------------	--------	-----------------

Witnesses	Defendant DLN
-----------	---------------

STATE OF MICHIGAN, COUNTY OF _____ .

The complaining witness has filed a sworn complaint in this court stating that on the date and the location described, the defendant, contrary to law,

IN THE NAME OF THE PEOPLE OF **THE STATE OF MICHIGAN** _____

TAKE NOTICE: YOU ARE SUMMONED TO APPEAR for arraignment on _____
Day and date

at _____ m., at the address above _____, Michigan,
Time Location

before the presiding judge. If you fail to appear, a warrant will be issued for your arrest upon the prosecutor's request.

This summons expires on the date of hearing. **If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.**

Requested on _____ by: Date	
_____ Prosecuting official	



Date

Judge/Magistrate/Court clerk

Bar no.

SUMMONS, Criminal

Case No. _____

PROOF OF SERVICE

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE

OFFICER CERTIFICATE

I certify that I am a sheriff, deputy sheriff, bailiff, appointed court officer, or attorney for a party [MCR 2.104(A)(2)], and that: (notary not required)

OR

AFFIDAVIT OF PROCESS SERVER

Being first duly sworn, I state that I am a legally competent adult who is not a party or an officer of a corporate party, and that: (notary required)

- I served personally a copy of the summons,
- I served by registered or certified mail (copy of return receipt attached) a copy of the summons,

together with _____, on: _____
Attachment

Defendant's name	Complete address(es) of service	Day, date, time

I have personally attempted to serve the summons, together with _____, on _____, at _____ and have been unable to complete service.
Attachment
Name
Address

I declare that the statements above are true to the best of my information, knowledge, and belief.

Service fee	Miles traveled	Fee	
\$		\$	
Incorrect address fee	Miles traveled	Fee	TOTAL FEE
\$		\$	\$

Signature _____
Name (type or print) _____
Title _____

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Deputy court clerk/Notary public

Notary public, State of Michigan, County of _____

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received service of the summons, together with _____, on _____
Attachment

_____ on _____
Day, date, time

_____ on behalf of _____
Signature

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	MOTION/ORDER OF NOLLE PROSEQUI	CASE NO.
---	---	-----------------

ORI _____ Court address _____ Court telephone no. _____
MI- _____

Police Report No. _____

THE PEOPLE OF _____ <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____	v	Defendant's name, address, and telephone no. _____ _____ _____			
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">CTN/TCN</td> <td style="width:33%;">SID</td> <td style="width:33%;">DOB</td> </tr> </table>	CTN/TCN	SID	DOB
CTN/TCN	SID	DOB			

Juvenile In the matter of _____

Count	CRIME	CHARGE CODE(S) MCL citation/PACC Code

MOTION

_____, prosecuting official, moves for a nolle prosequi in this case for the following reason(s):

Date Prosecuting official Bar no.

ORDER

IT IS ORDERED:

- 1. Motion for nolle prosequi is granted and the case is dismissed without prejudice.
- 2. Motion for nolle prosequi is granted as to the following charge(s), which are dismissed without prejudice:

- 3. Motion for nolle prosequi is denied.
- 4. Defendant/Juvenile shall be immediately discharged from confinement in this case.
- 5. Bond is canceled and shall be returned after costs are deducted.
- 6. Bond is continued on the remaining charge(s).

Date Judge/Magistrate Bar no.

If item 1 is checked, the clerk of the court shall advise the Michigan State Police Criminal Justice Information Center of the disposition as required under MCL 769.16a.

TO THE DEFENDANT: Your fingerprints and arrest card will be destroyed by the Michigan State Police if you have been found not guilty. They may also be destroyed after motion and order for destruction of fingerprints (forms MC 235 and MC 392).

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	ORDER DELAYING SENTENCE	CASE NO.
---	--------------------------------	-----------------

ORI MI- Court address Court telephone no.

Police Report No. _____

THE PEOPLE OF The State of Michigan

v

Defendant's name, address, and telephone no.

CTN/TCN	SID	DOB
---------	-----	-----

THE COURT FINDS:

1. **The** defendant was found guilty on _____ of the crime(s) stated below:
Date

Count	CONVICTED BY			DISMISSED BY*	CRIME	CHARGE CODE(S) MCL citation/PACC Code
	Plea*	Court	Jury			

*Insert "G" for guilty plea, "NC" for nolo contendere, or "MI" for guilty but mentally ill, "D" for dismissed by court, or "NP" for dismissed by prosecutor/plaintiff.

2. Defendant represented by an attorney: _____
 advised of right to counsel and appointed counsel and knowingly, intelligently, and voluntarily waived that right.
3. Conviction reportable to Secretary of State**.
4. HIV testing and sex offender registration are completed. Defendant's driver's license number _____
5. **The** defendant has been fingerprinted according to MCL 28.243.
6. A DNA sample is already on file with the Michigan State Police from a previous case. No assessment is required.

IT IS ORDERED:

7. The sentence is delayed until _____ . The reason for the delay is:
not to exceed one year

8. **The** defendant is placed under the supervision of _____ .

9. **The** defendant shall pay:

State Minimum	Crime Victim	Restitution	DNA Assess.	Court Costs	Attorney Fees	Fine	Other Costs	Total
\$	\$	\$	\$	\$	\$	\$	\$	\$

The due date for payment is _____. Fine, costs, and fees not paid within 56 days of the due date are subject to a 20% late penalty on the amount owed. Only the fine and some costs may be satisfied by serving time in jail.

The defendant shall serve _____ days in jail for failure to pay on time, as part of a conditional sentence. Prior to enforcement of jail time for failing to pay, the court must determine the defendant's ability to pay.

10. **The** defendant shall complete the following rehabilitative services.

- Alcohol Highway Safety Education Treatment (outpatient inpatient residential mental health)
 Specify: _____

11. The vehicle used in the offense shall be immobilized or forfeited. (See separate order.)

12. Other: _____

Date

Judge/Magistrate

Bar no.

NOTE: This is not a final order. At the conclusion of the delay, a final order must be entered.

**Currently, convictions are reportable to the Secretary of State under MCL 257.625(21)(a), MCL 257.732, MCL 324.80131, MCL 324.81134(12), MCL 324.81135(7), MCL 324.82157, and MCL 333.7408a(12).

<p align="center">STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT</p>	<p align="center">ORDER FOR SECURITY FOR COSTS</p>	<p align="center">CASE NO.</p>
---	---	---------------------------------------

Court address

Court telephone no.

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

v

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

ORDER

1. _____ has moved to require _____
 Name Name
 to furnish security for costs.

IT IS ORDERED:

2. _____ shall file with the clerk of the court a surety bond approved by
 the court in the amount of \$ _____ .

3. Bond shall be filed on or before _____ .
 Date

Date

Judge Bar no.

APPROVAL OF SURETY(IES)

The court has reviewed the surety bond filed to secure costs. The surety(ies) are approved.

Date

Judge Bar no.

<p align="center">STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT</p>	<p align="center">EX PARTE MOTION AND ORDER TO RENEW CIVIL JUDGMENT</p>	<p align="center">CASE NO.</p>
---	--	---------------------------------------

Court address

Court telephone no.

Plaintiff's name, address, and telephone no.

Defendant's name, address, and telephone no.

v

Plaintiff's attorney, bar no., address, and telephone no.

Defendant's attorney, bar no., address, and telephone no.

Judgment for: _____

EX PARTE MOTION

- The moving party is _____
Name (type or print)(i.e., assignee) Address City State Zip
- A money judgment was entered in this action on _____ in the amount of \$ _____.
- A payment in the amount of \$ _____ was received by the plaintiff on _____, which was the last payment received.
Date
- No payments have been received on this judgment.
- I REQUEST** that the judgment be renewed.

_____ Date

_____ Signature

ORDER

IT IS ORDERED:

5. The motion is granted. denied. **scheduled for hearing.**

_____ Date

_____ Judge Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this ex parte motion and order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

_____ Date

_____ Signature

Forms MC 406a and MC 406b

**PETITION TO DISCONTINUE
SEX OFFENDER REGISTRATION
AND ORDER**

Use these forms if you want to ask the court to grant you permission to discontinue the requirement to register with a Sex Offender Registration authority.

PETITION CHECKLIST

Use the following checklist to make sure you have done all the steps that are needed.

DID YOU . . .

1. Determine your eligibility to have your registration requirement discontinued? See pages 3, 4, and 5. YES
2. Complete the petition form? See page 9 for instructions. YES
3. File the petition with the court? See page 6. YES
4. Mail (serve) a copy of the petition to the prosecuting official? See page 6. YES
5. Complete and file the proof of service with the clerk's office **after** you mailed the petition? See page 6. YES
6. Keep one copy of the petition packet for yourself? YES

If you cannot answer "yes" to all the above steps, a hearing on your petition may be delayed or your petition may be dismissed.

By using this form packet you are representing yourself in a court action to try to discontinue your requirement to register with a Sex Offender Registration authority. You must follow the instructions in this packet. If you fail to do even one of the required steps, the order you get from the court may not give you what you want.

If you have questions about any steps in the process, refer to pages 3 through 8 of this booklet for details. You may wish to consult an attorney.

INSTRUCTIONS FOR USING FORM MC 406a FILING AND SERVING A PETITION

»» DEFINITION: Discontinuing Sex Offender Registration

An order discontinuing sex offender registration removes the obligation of an individual, who has been convicted or adjudicated of a listed offense as defined in MCL 28.722, to register and update information about himself or herself as required by the Sex Offenders Registration Act. An order discontinuing sex offender registration also deletes that individual's registration information from the Michigan State Police sex offender registry database and the public sex offender website. **An order discontinuing sex offender registry does not remove a conviction from the individual's criminal history record.**

»» FILING A PETITION

1. Do You Qualify to File a Petition?

A person who petitions to discontinue sex offender registration must meet certain conditions. To find out if you qualify to have your registration requirement discontinued, read the following directions. Also, if you already filed a petition to discontinue sex offender registration and it was denied after a court hearing, you cannot file another petition. Michigan law outlines five circumstances describing when an individual is eligible to petition to discontinue sex offender registration:

- If you were convicted as an adult and are a Tier I offender, you may be eligible to petition the court. To determine what Tier you have been classified in, you can look for your name on the Michigan Sex Offender Registry Website, www.mipsor.state.mi.us. The definition of Tier I offender can be found in MCL 28.722(r). If you were convicted as an adult and are a Tier I offender, answer the questions in Box A on page 4.
- If you were adjudicated when you were a juvenile (less than 17 years of age) and are a Tier III offender, you may be eligible to petition the court. To determine what Tier you have been classified in, contact your registering authority. The definition of Tier III offender can be found in MCL 28.722(v). If you were adjudicated as a juvenile and are a Tier III offender, answer the questions in Box B on page 4.
- If you were convicted of an offense listed in MCL 28.722(s), (u), or (w) that was the result of a consensual sexual act between you and the victim, you may be eligible to petition the court. Answer the questions in Box C on page 5.
- If you were registered under the Sex Offenders Registration Act before July 1, 2011 for an offense that required registration but that registration is no longer required on or after July 1, 2011, continue to item 2 on page 5. The Michigan State Police may have made the determination that you are no longer required to register. Before filing a petition with the court to discontinue your registration requirements, contact your registering authority to find out if your sex offender registration requirement was already discontinued.
- If you were adjudicated as a juvenile for an offense listed in MCL 28.722(s), (u), or (w) and you were less than 14 years of age at the time of the offense, continue to item 2 on page 5. The Michigan State Police may have made the determination that you are no longer required to register. Before filing a petition with the court to discontinue your registration requirements, contact your registering authority to find out if your sex offender registration requirement was already discontinued.

A: Convicted as an Adult (If a statement is true, check "Yes." If a statement is not true, check "No.")

It has been 10 or more years since the date of my conviction, or if I was confined, it has been more than 10 years since I was released. Yes No

I have not been convicted of any felony since the date of my conviction, or if I was confined, since the date I was released. Yes No

I have not been convicted of any offense listed in MCL 28.722(s), (u), or (w) since the date of my conviction, or if I was confined, since the date I was released. Yes No

I have successfully completed my assigned period of supervised release, probation, or parole without revocation at any time of that supervised release, probation, or parole. Yes No

If ordered, I have successfully completed a sex offender treatment program certified by the United States Attorney General under 42 USC 16915(B)(1) or another appropriate sex offender treatment program. Yes No

If all the above statements are checked **yes**, you may be eligible to have your registration requirement discontinued. Continue to item 3 on page 5. If any box is checked no, you are not eligible to have your registration requirement discontinued under MCL 28.728c(1). However, you may still be eligible if you were convicted of an offense in MCL 28.722(s), (u), or (w) that was the result of a consensual act between you and the victim. If so, continue to Box C on page 5. If you are unsure if you are eligible, you should consult an attorney.

MCL 28.728c(1), (12)

B: Adjudicated as a Juvenile (If a statement is true, check "Yes." If a statement is not true, check "No.")

I was required to register based on an order of disposition that is open to the public under MCL 712A.28. Yes No

It has been 25 or more years since the date of my adjudication, or if I was confined, it has been more than 25 years since I was released. Yes No

I have not been convicted of any felony since the date of my adjudication, or if I was confined, since the date I was released. Yes No

I have not been convicted of any offense listed in MCL 28.722(s), (u), or (w) since the date of my adjudication, or if I was confined, since the date I was released. Yes No

I have successfully completed my assigned period of supervised release, probation, or parole without revocation at any time of that supervised release, probation, or parole. Yes No

If ordered, I have successfully completed a sex offender treatment program certified by the United States Attorney General under 42 USC 16915(B)(1) or another appropriate sex offender treatment program. Yes No

If all the above statements are checked **yes**, you may be eligible to have your registration requirement discontinued. Continue to item 3 on page 5. If any box is checked no, you are not eligible to have your registration requirement discontinued under MCL 28.728c(2). However, you may still be eligible if you were convicted of an offense in MCL 28.722(s), (u), or (w) that was the result of a consensual act between you and the victim. If so, continue to Box C on page 5. If you are unsure if you are eligible, you should consult an attorney.

MCL 28.728c(2), (13)

C: Consensual Sexual Act (If a statement is true, check "Yes." If a statement is not true, check "No.")

I was convicted of an offense listed in MCL 28.722(s), (u), or (w) and the offense was the result of a consensual sexual act between me and the victim.

Yes No

If you checked **no**, you are not eligible to have your registration requirement discontinued. If the above statement is checked **yes**, answer the following three questions.

The victim was 13 years of age or older but less than 16 years of age at the time of the offense and I was not more than 4 years older than the victim.

Yes No

I was convicted of a violation of MCL 750.158, 750.338, 750.338a, or 750.338b and the victim was 13 years of age or older but less than 16 years of age at the time of the violation and I was not more than 4 years older than the victim.

Yes No

I was convicted of a violation of MCL 750.158, 750.338, 750.338a, 750.338b, or 750.520c(1)(i) and the victim was 16 years of age or older and not under my custodial authority at the time of the violation.

Yes No

If one of the above three statements is checked **yes**, you may be eligible to have your registration requirement discontinued. Continue to item 3 below. If all boxes are checked no, you are not eligible to have your registration requirement discontinued under MCL 28.728c(3). If you are unsure if you are eligible, you should consult an attorney.

MCL 28.728c(3), (14), (15)

2. Do You Need An Attorney?

In order to ask the court to discontinue your requirement to register with a sex offender registration authority, you must file a petition with the court in which you were convicted or adjudicated. You can either hire an attorney or you can represent yourself. If you can follow all the steps outlined in this packet, you may not need an attorney. However, if after reading this packet you think you need assistance, you should call an attorney.

If you decide to represent yourself, complete the checklist on page 2 to make sure you have done everything that is required.

3. Complete Form MC 406a, Petition to Discontinue Sex Offender Registration

Print form MC 406a, Petition to Discontinue Sex Offender Registration, from the website. Use the information from the copy of your conviction or adjudication to fill in the blanks on the petition form. Follow the instructions on page 9.

4. Signing the Petition Under Oath

Now that the petition (form MC 406a) is completed, you must sign your petition under oath in front of a notary public (you can find a notary at a bank) or the clerk of the court. Bring your photo identification with you when you sign the petition.

If you sign your petition in front of a notary public, you can sign one petition form (see item 5a for details) and make three additional copies of your petition after it is notarized. If you go **to** the court in person, make four copies of your petition beforehand and sign all four copies of the petition form (see item 5b for details). Either way is acceptable; however, it is a good idea to file your petition in person with the court. That way, if you have forgotten something or need to change something, you can take care of it right away. If you decide to sign your petition in front of a notary public, you can still file your petition in person with the court.

5a Signing Before a Notary Public: Take the petition (form MC 406a) that you prepared as directed in item 4 and your photo identification to a notary public. Sign the petition in front of the notary public. There may be a fee for this.

5b Signing Before the Clerk of the Court: Make four copies of the petition (form MC 406a). Take all four copies and your photo identification to the clerk of the court where you were convicted. Sign all four copies of the petition in front of the clerk of the court.

6. Filing the Petition with the Court

You can file your petition (form MC 406a) in person with the court or by mailing it to the court. If you file by mail, you must include a postage-paid envelope in order for the court to return three forms to you after the clerk of the court records the filing of your petition. At the time of filing, the clerk of the court will write the name of the judge assigned to your case on all four copies of your petition.

The clerk of the court will set a hearing date at the time of filing. The clerk of the court will complete the **Notice of Hearing** section on all four copies of your petition (form MC 406a) and return the remaining three copies of the petition to you.

»» SERVING THE PETITION

When you receive the three remaining copies of the petition (form MC 406a) from the court, serve one copy on (mail it to) the prosecuting official by first-class mail no later than 30 days before the hearing date on the petition. Get the address from the clerk or see www.michiganprosecutor.org.

7. Fill Out the Proof of Service and File With the Court

You should have two copies of the petition left. One of these copies is for you to keep for your records. The other copy is for filing proof of service with the court.

On both copies of the petition, fill out the **Certificate of Mailing** at the bottom of the form. Write in the date that you mailed the petition to the prosecuting official. Then date and sign the **Certificate of Mailing**.

After you fill out and sign the **Certificate of Mailing**, mail one of the remaining petitions (form MC 406a) with the completed **Certificate of Mailing** to the court. This shows the court that you mailed a copy to the prosecuting official.

»» INFORMATION ABOUT THE PETITION PROCESS

The prosecuting official will review your petition and also has the opportunity to participate in the hearing and to seek appellate review of any decision on the petition. The prosecuting official may or may not appear at the hearing. In addition, the prosecuting official is required to notify the victim when a petition has been filed to discontinue sex offender registration. The victim has the right to appear at the hearing on the petition and to make a written or an oral statement.

»» PREPARING FOR THE HEARING

On the hearing date, any of the following may happen:

- The prosecuting official may attend the hearing to contest the petition. In that case, the court will hear what the prosecuting official has to say before making its decision.
- If the prosecuting official does not attend the hearing to contest the petition, the court will make its decision based on the court's own records, as well as any response that may have been filed on behalf of the prosecuting official.
- If the victim attends the hearing and/or provides an oral or a written statement, the court will consider that statement before making its decision.
- You will have the opportunity to speak to the court at the hearing. If you do not appear, your petition may be dismissed.

When you go to court for the hearing, take your copy of the petition (form MC 406a) with you.

»» INFORMATION ABOUT ATTENDING THE HEARING

The hearing will usually take place at the court where the petition was filed. It is important for you to arrive **at** court on time; if you file a petition and are not in court when your case is called, the petition may be dismissed or denied. Bring your petition.

1. If you are representing yourself, you are expected to conduct yourself as an attorney and to follow the same general rules as an attorney.
2. Go to the judge's courtroom on the scheduled day and time. Dress neatly. Arrive 10 or 15 minutes early.
3. Go into the courtroom, take a seat, and wait for your case to be called. Do not interrupt any hearing in progress.
4. The court clerk will call the case and you will have the opportunity to explain your request to the judge.
5. When your case is called by the clerk or the judge, go to the front of the courtroom and clearly state:

- 1) your name.
- 2) that you are representing yourself.
- 3) that you are seeking to have the court discontinue your sex offender registration requirement.
- 4) the facts or reasons for your request.

Answer the judge's questions clearly and directly.

6. The judge will ask the prosecuting official, if present, to state any objections.
7. If the judge determines that your circumstances warrant discontinuing sex offender registration, the court will prepare an order.

»» **GETTING YOUR ORDER**

The court prepares and signs an order after the hearing. The court will provide you and the Michigan State Police with a copy of the order. After the Michigan State Police receives a copy of the order discontinuing sex offender registration, your registration information will be removed from the department's computerized law enforcement database pursuant to MCL 28.728d and from the public sex offender website pursuant to MCL 28.728(6). If the court denies your request to discontinue registration, your registration will remain public. An order discontinuing sex offender registry does not remove a conviction or adjudication from the individual's criminal history record.

**INSTRUCTIONS FOR COMPLETING
"PETITION TO DISCONTINUE SEX OFFENDER REGISTRATION"**

Please print neatly. After filling in the form, you will need to print four copies of the form.

Items A through F must be completed before your petition can be filed with the court. Please read the instructions for each item. Fill in the correct information for that item on the form.

- A** Before you fill in the Case No., get the court papers of your conviction and copy the Case No. from those court papers onto this form.
- B** Use your court papers to write in the ORI Number, if available. You do not need to fill in the court address and telephone number.
- C** Use your court papers to fill in the boxes for the plaintiff and defendant or for "In the Matter of." Copy the names from these court papers onto this form.
- D** Use your court papers to write in the date of your conviction/adjudication and the offense for which you were convicted/adjudicated. If you were not confined for this offense, check the first box. If you were confined for this offense, check the second box and write in the date you were released from confinement.
- E** Check the box that best describes your situation. Make sure that the statement you check is true.
- F** **DO NOT SIGN YOUR NAME** until you are standing in front of a notary or the clerk of the court.
- G** **DO NOT WRITE IN THIS SECTION.** The notary public or clerk of the court will complete this section.
- H** File your application with the court. The clerk of the court will complete the Notice of Hearing. See page 6 of this packet for details.
- I** Read page 6 of this packet for details about mailing this form to the prosecuting official. On the date you mail the copies, write in the date and sign your name on the remaining two copies. Mail or take one copy to the clerk of the court.

You must read this booklet for directions on the legal process.

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY	PETITION TO DISCONTINUE SEX OFFENDER REGISTRATION	(A) CASE NO.
--	--	---------------------

(B) ORI MI- _____ Court address _____ Court telephone no. _____

(C) THE PEOPLE OF _____

The State of Michigan

v

Defendant's name, address, and telephone no. _____

CTN	SID	DOB
-----	-----	-----

In the Matter of _____
Juvenile name, DOB, alias(es)

(D) 1. On _____ I was convicted of the following offense _____.
 I was not confined for this offense. I completed the term of confinement for this offense on _____.

(E) 2. a. I am a Tier I offender and at least 10 years have passed since I was convicted or since I was released from confinement for the conviction. **OR**
 I am a Tier III offender and at least 25 years have passed since I was adjudicated or since I was released from confinement for the adjudication.

AND

- 1) I have not been convicted of any felony or any offense listed in MCL 28.722(s), (u), or (w) since the date of my conviction or the date of my release from any confinement for this conviction.
- 2) I have successfully completed my assigned period of supervised release, probation, or parole without revocation at any time of that supervised release, probation, or parole.
- 3) I was ordered to complete a sex offender treatment program and I successfully completed that program.
- b. I was convicted of an offense listed in MCL 28.722(s), (u), or (w), and the conviction was for an offense that was the result of a consensual sexual act between me and the victim, and the victim was 13 years of age or older but less than 16 years of age at the time of the offense and I was not more than 4 years older than the victim.
- c. I was convicted of a violation of MCL 750.158, 750.338, 750.338a, 750.338b, or 750.520c(1)(i) as a result of a consensual act and the victim was 16 years of age or older and not under my custodial authority at the time of the violation.
- d. I was registered under the Sex Offenders Registration Act before July 1, 2011 for an offense that required registration and the offense no longer requires registration.
- e. I was adjudicated as a juvenile for an offense listed in MCL 28.722(s), (u), or (w), and I was less than 14 years of age at the time of the offense.

3. I request that the court issue an order to discontinue sex offender registration as provided by law.

(F) _____
Petitioner signature

(G) Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Date Signature: _____
Deputy clerk/Notary public

Notary public, State of Michigan, County of _____

NOTICE OF HEARING **NOTE:** If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to fully participate in court proceedings, please contact the court immediately to make arrangements.

(H) A hearing will be held on the above petition to discontinue registration on _____ at _____
Date Time
at _____ before _____
Location Bar no.

NOTE: The victim has the right to attend this hearing and to make a written or an oral statement to the court before any decision regarding this petition is made. The victim is not required to appear at this hearing against his or her will.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this petition and notice of hearing on the prosecuting official by first-class mail addressed to his/her last-known address as defined by MCR 2.107(C)(3).

(I) _____ Date _____
Petitioner/Attorney signature

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	MOTION TO DESTROY DNA PROFILE AND SAMPLE	CASE NO.
---	---	-----------------

ORI Court address Court telephone no.

MI- **New Form**

Police Report No.

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ _____	v	Defendant's/Juvenile's name, address, and telephone no. _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">CTN/TCN</td> <td style="width:33%;">SID</td> <td style="width:33%;">DOB</td> </tr> </table>	CTN/TCN	SID	DOB
CTN/TCN	SID	DOB			
<input type="checkbox"/> Juvenile In the matter of _____					

MOTION

1. I, _____, was arrested and a DNA sample was taken from me, and
Name (type or print)
 The offense(s) charged against me in this case was/were dismissed.
 I was acquitted of all offenses(s) charged against me in this case.
2. To my knowledge, the arresting agency and the Michigan State Police have not destroyed the DNA profile and sample.
3. **I REQUEST** that my DNA profile and sample be destroyed by the arresting agency and Michigan State Police.

Date

Signature

NOTICE OF HEARING

A hearing will be held on this motion on _____ at _____
Date Time

at _____ before Hon. _____
Location Bar no.

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	ORDER TO DESTROY DNA PROFILE AND SAMPLE	CASE NO.
---	--	-----------------

ORI _____ Court address _____ Court telephone no. _____
 MI- _____
 Police Report No. _____ New Form

THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____ _____	v	Defendant's/Juvenile's name, address, and telephone no. _____ _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">CTN/TCN</td> <td style="width:33%;">SID</td> <td style="width:33%;">DOB</td> </tr> </table>	CTN/TCN	SID	DOB
CTN/TCN	SID	DOB			

Juvenile In the matter of _____

1. _____ filed a motion requesting that his/her DNA profile and sample
Name of defendant/juvenile
 be destroyed by the arresting agency and Michigan State Police as required by law.
2. A hearing was held on the motion on _____ .
Date

IT IS ORDERED:

3. In accordance with MCL 28.176, the arresting agency and Michigan State Police shall
 - not destroy the DNA profile and sample of the defendant/juvenile.
 - immediately destroy the DNA profile and sample of the defendant/juvenile and provide certification of that fact to the court.

Date

Judge Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER TERMINATING PARENTAL RIGHTS/ RIGHTS OF PERSON IN LOCO PARENTIS AFTER RELEASE OR CONSENT	FILE NO.
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In the matter of _____ DOB: _____, adoptee
Full name of child

1. Date of hearing: _____ Judge: _____
Bar no.

THE COURT FINDS:

2. A release of the child has been executed according to law by _____
Name(s)

3. The consent to the adoption is genuine and is given by the person(s) having legal authority to sign the consent and the best interests of the adoptee will be served by the adoption.

4. The adoptee is an Indian child as defined in MCR 3.002(12) and the court has considered the application of the Indian Child Welfare Act and the Michigan Indian Family Preservation Act in this matter.

IT IS ORDERED:

5. The rights of the parent(s) or the person in loco parentis _____ are terminated.
Name(s)

 Date

 Judge

Do not write below this line - For court use only

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	CERTIFICATE OF ADOPTIVE INFORMATION	FILE NO.
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In the matter of _____ DOB: _____, adoptee
Full name of child

1. The tribal affiliation of the child is _____ .

2. The names and addresses of the biological parents of the child are:

Name of biological father (type or print)

Name of biological mother (type or print)

Address

Address

City, state, and zip

City, state, and zip

3. The names and addresses of the adoptive parents of the child are:

Name of adoptive father (type or print)

Name of adoptive mother (type or print)

Address

Address

City, state, and zip

City, state, and zip

4. The name of the agency having information pertaining to the adoption is _____

_____ .

Date

Signature of court representative

Name (type or print)

Do not write below this line - For court use only

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITIONER'S VERIFIED ACCOUNTING	FILE NO.
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In the matter of _____ DOB: _____, adoptee
Full name of child

I filed a petition to adopt the adoptee. This accounting is a complete itemization of payments/disbursements of money or anything of value made or agreed to be made by me or on my behalf in connection with this adoption as of this date. Form PCA 347a will be submitted to report any additional payments/disbursements of money or anything of value made or **agreed** to be made by me or on my behalf in connection with this adoption.

EXPENSES	TOTAL
1. Court Filing Fee Petition for Adoption \$ _____ Order of Adoption \$ _____ Motion for Early Confirmation \$ _____ Birth Certificate Fee \$ _____ Other petitions, motions, orders \$ _____	\$
2. Agency/Michigan Department of Health and Human Services Charges (itemized on other side of this form)	\$
3. Attorney Fees (itemized on other side of this form)	\$
4. Travel Expenses (itemized on other side of this form)	\$
5. Medical, Hospital, Nursing, or Pharmaceutical Expenses (itemized on other side of this form)	\$
6. Counseling Services (itemized on other side of this form)	\$
7. Living Expenses (itemized on other side of this form)	\$
8. Information Gathering Expenses (itemized on other side of this form)	\$
9. Other (itemized on other side of this form)	\$
I REQUEST that the court approve these payments and disbursements.	TOTAL
	\$

I declare that this accounting and the attachments have been examined by me and that the contents are true to the best of my information, knowledge, and belief.

Date	Date
Signature of petitioner	Signature of petitioner
Name (print or type)	Name (print or type)
Address	Address
City, state, zip	City, state, zip
Telephone no.	Telephone no.

NOTE: This accounting must be filed at **least** 7 days before formal placement for adoption.

Do not write below this line - For court use only

