

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
JUDICIAL DISTRICT
COUNTY**

NOTICE OF HEARING AND MOTION

CASE NO.

Court address

Court telephone no.

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

v

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

NOTICE OF HEARING

1. Motion title: _____
2. Moving party: _____
3. This matter has been placed on the motion calendar for:

Judge	Bar no.	Date	Time
Hearing location <input type="checkbox"/> Court address above <input type="checkbox"/>			

4. If you require special accommodations to use the court because of disabilities, please contact the court immediately to make arrangements.

MOTION

PROOF OF SERVICE

Notice of Hearing

Case No. _____

TO PROCESS SERVER: You must promptly serve the copies of the notice of hearing 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 / NON-SERVICE

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 a copy of the notice of hearing by:

personal service registered or certified mail (copy of return receipt attached) on:

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

I have personally attempted to serve a copy of the notice of hearing on the defendant and have been unable to complete service.

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

Service fee	Miles traveled	Mileage fee	Total fee
\$		\$	\$

Signature

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 hearing on _____
Day, date, time

Signature on behalf of _____