

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT COUNTY	NOTICE OF HEARING AND MOTION	CASE NO. and JUDGE
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Court address _____ Court telephone no. _____

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

In the matter of _____

NOTICE OF HEARING

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

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

4. If you require 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.

MOTION

Date

Signature

CERTIFICATE OF MAILING

I served a copy of this notice of hearing and motion on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3). I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Signature