Approved, SCAO

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JIS Code: RRC

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REPORTER/RECORDER CERTIFICATE OF ORDERING OF TRANSCRIPT ON APPEAL Appeal to: ☐ Court of Appeals ☐ Circuit	CASE NO.

Court address

Court telephone no.

Plaintiff/Petitioner name(s) and address(es) ☐ Appellant ☐ Appellee	v	Defendant/Respondent name(s) and address(es) ☐ Appellant ☐ Appellee
Attorney, bar no., address, and telephone no.		Attorney, bar no., address, and telephone no.

☐ Probate In the matter of _____

This certificate must be filed by the appellant or the reporter/recorder within 7 days on appeals to the Court of Appeals.
This certificate must be filed by the appellant within 7 days on appeals to the circuit court.

I am a certified court reporter/recorder for the court designated above and I certify that:

1. On _____ (Date) ☐ a portion of the ☐ the complete transcript of proceedings, taken in this case before Judge _____ on _____ (Date(s)), was ordered by
   - ☐ a. _____ (Attorney name (type or print)), attorney for _____ (Name (type or print)).
   - ☐ b. the appellant, _____ (Name (type or print)).
   - ☐ c. the court.

☐ 2. Payment has been secured and the transcript will be furnished by me on _____ (Estimated date of completion). Estimated number of pages is _____ .

☐ 3. The transcript has been filed with the court and furnished as requested. Date filed: _____

☐ 4. There is no record to be transcribed.

Date	Certification designation and number
Reporter/Recorder signature	Business address
Name (type or print)	City, state, zip — Telephone no.

List names, certification designations and numbers, and dates of each proceeding of each reporter or recorder who reported or recorded or transcribed any part of the proceedings:

MCR 7.101(C)(3)(c), MCR 7.210(B)(3)(a)