

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT COUNTY	REQUEST FOR HEARING ON A MOTION	CASE NO.
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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.

1. Motion title: _____

2. Moving party: _____

3. Please place the following on the motion calendar for:

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

4. I certify that I have made personal contact with _____ on _____ regarding concurrence in the relief sought in this motion and that concurrence has been denied or that I have made reasonable and diligent attempts to contact counsel requesting concurrence with this motion.

Date

Attorney Bar no.

5. DOMESTIC RELATIONS MOTIONS ONLY

- a. A recommendation from the Friend of the Court is is not requested.
- b. All necessary information has has not been submitted to the Friend of the Court.

6. Clerk's record of decision: Granted Denied Not heard

Date Clerk