

STATE OF MICHIGAN JUDICIAL DISTRICT	ANSWER Civil	CASE NO.
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Court address **Court telephone no.**

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

v

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

- Defendant(s),
 Attorney for defendant(s), in answer to the complaint, state(s):

(Number paragraphs in the answer to correspond to paragraphs in the complaint. Attach additional sheets if necessary.)

Date

Defendant attorney signature

Defendant's signature

CERTIFICATE OF SERVICE

I certify that on this date I served a copy of this answer on the plaintiffs or their attorneys by
 personal service. first-class mail addressed to their last-known address(es) as defined in MCR 2.107(C)(3).

Date

Signature