Approved, SCAO

Original - Court
1st copy - Plaintiff/Attorney

2nd copy - Defendant/Attorney
3rd copy - Friend of the court
4th copy - Third party (as needed)

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER FOR GENETIC TESTING (REVOCATION OF PATERNITY ACT)	CASE NO.

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.
Third party's name, address, and telephone no.		Third party's attorney, bar no., address, and telephone no.

THE COURT FINDS:

1. An action has been brought under the Revocation of Paternity Act regarding _____
Name of child

born _____ .
Date of birth

☐ 2. An order for genetic testing is appropriate because the affidavit filed by the person filing the action was sufficient under MCL 722.1437. (Item 2 is only used where an action to revoke an acknowledgment of paternity is filed.)

IT IS ORDERED:

3. To assist the court in making its determination in this action, _____
Name(s)

_____ shall participate in genetic testing in accordance with MCL 722.716.

4. The cost for genetic testing shall be paid as follows: _____

_____

5. Testing shall be completed and test results filed with this court by _____ .
Date

6. Other:

_____
Date

_____
Judge

Bar no.

MCL 722.1437. MCL 722.1439, MCL 722.1441, MCL 722.1443(5)