Approved,	SCAO
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Court address

## **STATE OF MICHIGAN** JUDICIAL CIRCUIT COUNTY

Original - Appellate court

1st copy - Trial court

### 2nd copy - Defendant 3rd copy - Plaintiff

CASE NO.

# ORDER TO SHOW CAUSE WHY APPEAL SHOULD NOT BE DISMISSED

Court telephone no.

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

1. Appellant has filed an appeal with this court.

2. Appellant has failed to comply with the following provisions of the Michigan Court Rules concerning appeals:

## **IT IS ORDERED:**

3. The appellant's attorney shall appear on $\frac{1}{Date}$		at Time	at
Location	to shov	w cause why the appeal should	d not be dismissed.
Date	Judge		Bar no.
	CERTIFICATE OF MAILING		

I certify that on this date I served a copy of this order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 2.107(C)(3).

Date

Court clerk