

<b>STATE OF MICHIGAN JUDICIAL DISTRICT</b>	<b>COMPLAINT MISDEMEANOR</b>	<b>CASE NO. and JUDGE</b>
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**ORI MI-** \_\_\_\_\_ **Court address** \_\_\_\_\_ **Court telephone no.** \_\_\_\_\_

<b>THE PEOPLE OF</b> <input type="checkbox"/> The State of Michigan  <input type="checkbox"/> _____ Codefendant(s) (if known)	<b>v</b>	Defendant's name and address  Victim or complainant  Complaining witness  Date: On or about
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City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	
Defendant DOB Put DOB in Ref. No. row 1 on MC 97	Defendant DLN Put DLN on Ref. No. row 3 on MC 97	<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type	Defendant Sex	Defendant Race
Police agency report no.	Charge	Maximum penalty			

A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.

Witnesses \_\_\_\_\_

**STATE OF MICHIGAN, COUNTY OF** \_\_\_\_\_ .

The complaining witness says that on the date and at the location described, the defendant, contrary to law,

The complaining witness asks that defendant be summoned and dealt with according to law.

Summons authorized on _____ by: _____	Date
Prosecuting official _____	
<input type="checkbox"/> Security for costs posted	

I declare under the penalties of perjury that this complaint has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
 Complaining witness signature  
 \_\_\_\_\_  
 Date

<b>STATE OF MICHIGAN JUDICIAL DISTRICT</b>	<b>SUMMONS MISDEMEANOR</b>	<b>CASE NO. and JUDGE</b>
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<b>ORI MI-</b>	<b>Court address</b>	<b>Court telephone no.</b>
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<b>THE PEOPLE OF</b> <input type="checkbox"/> The State of Michigan  <input type="checkbox"/> _____ Codefendant(s) (if known)	<b>v</b>	Defendant's name and address  Victim or complainant  Complaining witness  Date: On or about
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Police agency report no.	Charge	Maximum penalty			

A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.

Witnesses \_\_\_\_\_

**STATE OF MICHIGAN, COUNTY OF** \_\_\_\_\_

The complaining witness has filed a sworn complaint in this court stating that on the date and the location described, the defendant, contrary to law,

**THE COURT FINDS** probable cause to believe the defendant committed the offense(s) set forth.  
 IN THE NAME OF THE PEOPLE OF  THE STATE OF MICHIGAN  \_\_\_\_\_

**TAKE NOTICE: YOU ARE SUMMONED TO APPEAR** for arraignment on \_\_\_\_\_  
Date and time

at  the address above  \_\_\_\_\_, Michigan,  
Location

before the presiding judge. If you fail to appear, a warrant may be issued for your arrest. This summons expires on the date of hearing. If you require accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

\_\_\_\_\_  
 Judge/Magistrate signature and date

Case No. \_\_\_\_\_

**PROOF OF SERVICE**

**TO PROCESS SERVER:** You must serve the copies of the summons, complaint, and any attachments and file proof of service with the court clerk. If you are unable to complete service, you must return this original and all copies to the court clerk.

**CERTIFICATE OF SERVICE / NONSERVICE / MAILING**

I served  personally  by first-class mail to the defendant's last known address a copy of the summons and complaint, together with the attachments listed below on:

I have attempted to serve the summons and complaint, together with the attachments listed below, and have been unable to complete service on:

Defendant's name/Household member's name	Date and time of service
Place or address of service	
Attachments (if any)	

I declare under the penalties of perjury that this proof of service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Service fee \$	Miles traveled	Fee \$	
Incorrect address fee \$	Miles traveled	Fee \$	<b>TOTAL FEE</b> \$

Signature \_\_\_\_\_

Name (type or print) \_\_\_\_\_

Title (if applicable) \_\_\_\_\_

**ACKNOWLEDGMENT OF SERVICE**

I acknowledge that I have received service of the summons and complaint, together with

Attachments \_\_\_\_\_ on \_\_\_\_\_  
Date and time

Signature \_\_\_\_\_ on behalf of \_\_\_\_\_

**CERTIFICATE OF MAILING BY COURT OR PROSECUTOR**

I certify that on this date I served a copy of this summons and complaint, together with any attachments on the defendant by first-class mail addressed to his or her last known address as defined in MCR 2.107(C)(3). I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Court Clerk/Prosecutor signature and date