Original - Court Approved, SCAO 1st copy - Subject 2nd copy - Return Additional copies as needed PROBATE JIS CODE: MOT, OSC

STATE OF MICHIGAN

CASE NO.

	JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	SHOW CAUSE				
Court address						Court telephone no.
Plaintiff(s)/Petitione	r(s)		٧	Defendant(s)/Res	sponde	ent(s)/Probationer
☐ Probate	Juvenile	In the matter of				
		MOTION A	AND A	FFIDAVIT		
1. I am intereste	d in this matter as					
	orint) cularity admissible facts es	i				n order dated
<ul><li>□ b. judgme</li><li>□ c. judgme</li></ul>	should not be found in nt should not be enter nt should not be enter	n □civil □crimina red against him/her (as red against him/her for	al d surety failure	contempt of cou v/agent) for the to file a garnish	ırt. full aı nee d	to show cause why mount of recognizance. isclosure. tify competently to the facts in this motion
	sworn to hefore me on		Si	gnature		County, Michigan.
	sworn to before me on					
My commission (	expires: Date	Sig	natur	e:		
Notary public, St	ate of Michigan, Coui	nty ofC	RDEI	R III	f you he co a fore partic	require special accommodations to use urt because of a disability or if you require ign language interpreter to help you fully pate in court proceedings, please contact
IT IS ORDERED: 5. You must app	ear before this court c	on at Date Tir	ne	_		address above   courtroom no.
for failu for the a judgmen your case other:	Inot be held in cive to comply with the reasons stated in the t should not be entereshould not be dismissed ar for a contempt here	ed against you.	nch w	arrant being iss		

## MOTION AND/OR ORDER TO SHOW CAUSE

Case No.

## PROOF OF SERVICE

**TO PROCESS SERVER:** You must make and file your return with the court clerk. If you are unable to complete service, you must return this original and all copies to the court clerk.

		CERTIF	CATE/AFFIDAVI	OF SERVICE/NONSE	RVICE	
I certify that I am court officer, or at		uty sheriff, l	bailiff, appointed	Being first duly sw	arty or an officer of	S SERVER m a legally competent a corporate party, and
	of the motion	and/or orde	er to show cause by ass mail o	/: n:		
Name(s)			Complete address(es)		Day, date, time	
☐ I have personall complete servic		o serve the	motion and/or orde	to show cause on the fo	llowing person(s) a	and have been unable to
Name(s)			Complete address(	es) of service		Day, date, time
I declare that the s	tatements ab		e to the best of my in	nformation, knowledge, a	and belief.	
\$ Incorrect address fee \$		\$ Fee \$	TOTAL FEE	Name (type or print)		
Subscribed and sw		me on		,		County, Michigan.
My commission ex Notary public, Stat		ı, County of		Deputy court clerk/Notary  MENT OF SERVICE	public	
I acknowledge that	t I have receiv	ed service	of this motion and/o	r order to show cause or	Day, date, time	
Signature				ehalf of		·
For use by the court clerk only when the show cause proceeding is initiated by the court.			CERTIFICATE OF MAILING			
			n and/or order to sho Iress as defined by		the person ordere	d to appear by first-class

Signature

Date