

STATE OF MICHIGAN JUDICIAL DISTRICT COURT JUDICIAL CIRCUIT COURT COUNTY	NOTICE OF HEARING ON PETITION FOR TESTING OF INFECTIOUS DISEASE	CASE NO.
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Court address _____ Court telephone no. _____

Petitioner name, address, and telephone no.

v

Respondent name, address, and telephone no.

1. This court has received the attached petition for testing of infectious disease.
2. A hearing on the petition will be held at _____
Location
 on _____ at _____
Date Time
 before Hon. _____
Bar no.
3. You have the right to be present at the hearing and to cross-examine witnesses.
4. You have the right to be represented by an attorney at all stages of the proceedings. If you want an attorney, you should hire one immediately so that s/he will be prepared on the hearing date. If you are unable to pay the cost of an attorney, the court shall appoint an attorney for you.

 Date

 Court clerk