

<p>STATE OF MICHIGAN PROBATE COURT COUNTY OF</p>	<p>PETITION FOR DISCHARGE FROM JUDICIAL ADMISSION</p>	<p>FILE NO.</p>
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In the matter of _____
First, middle, and last name

1. I, _____, state that I am
Name (type or print)
 a resident a person acting on behalf of a resident in _____ .
Name of facility
2. I object to the conclusion(s) in the periodic review report of _____
Name of resident
 dated _____ and filed with this court. The individual named in that report does not meet the criteria for judicially ordered treatment as prescribed by MCL 330.1531(3).
3. The interested parties, their addresses, and their representatives are identical to those appearing on the initial petition, except as follows:

4. **I REQUEST** that the court set a hearing and order a discharge.

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

 Date

 Signature of petitioner

USE NOTE: If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

Do not write below this line - For court use only