Original - Court 1st copy - Prisoner 2nd copy - Department of Corrections 3rd copy - Return to court

Court telephone no.

	Approved,	SCAO
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STATE OF MICHIGAN

JUDICIAL DISTRICT

JUDICIAL CIRCUIT

COUNTY PROBATE

PERSONAL SERVICE ON PRISONER AND AFFIDAVIT

CASE NO.

• •		
COURT	address	

Plaintiff(s)	Defendant(s)
	V
Probate Juvenile In the matter of	
	REQUEST
To the Warden/Administrator of	stitution
You are requested to serve Title or description of papers	
ogether with	
ON	on or before
	ervice below or have the prisoner complete the acknowledgment of service eason, you must return the original papers and all copies to the court clerk.
Date	Signature
	Name (type or print)
NOTE: This affidavit is prepared only when the prisoner does not acknowledge service.	FIDAVIT OF SERVICE
-	rty or an officer of a corporate party, and that I personally served the papers
described above and attachments, if any, on	
n	
Day, date, and time	
	Signature
	Name (type or print)
Subscribed and sworn to before me on	County, Michigan.
My commission expires:	Signature: Deputy court clerk/Notary public
Notary public, State of Michigan, County of	
	LEDGMENT OF SERVICE
acknowledge that I have received the papers described	dabove on Day, date, time