

STATE OF MICHIGAN  
22<sup>ND</sup> JUDICIAL CIRCUIT

**PRAECIPE FOR  
PPO MOTIONS**  
(for case type PP, PJ & PH only)

CASE NO.: \_\_\_\_\_  
JUDGE: \_\_\_\_\_

Address: Central Assignment, 101 E. Huron St., P.O. Box 8645, Ann Arbor, Michigan 48107-8645 Telephone: (734) 222-3383 Fax: (734) 222-3084

**ALL BLANKS ON THIS PRAECIPE MUST BE PROPERLY COMPLETED. FAILURE TO COMPLY WITH THIS REQUIREMENT MAY RESULT IN THE COURT DECIDING NOT TO HEAR YOUR MOTION.**

\_\_\_\_\_ VS \_\_\_\_\_  
(Petitioner) (Respondent)

1. I wish to place a Motion for (state nature of motion in brief form): \_\_\_\_\_

\_\_\_\_\_ on the Motion Docket for \_\_\_\_\_, \_\_\_\_\_ at \_\_\_\_\_.  
(Day) (Date) (Time)

2.  Are you serving by **MAIL**?  
Opposing party must be served at least 9 days before the hearing date.

**OR**

Are you serving in **PERSON**?  
Opposing party must be served at least 7 days before the hearing date.

Dated: \_\_\_\_\_

\_\_\_\_\_  
(Name of Petitioner / Attorney for Petitioner)

\_\_\_\_\_  
(Name of Respondent / Attorney for Respondent)

\_\_\_\_\_  
(Signature of Moving Attorney/Party)

Petitioner / Respondent (circle one)

\_\_\_\_\_  
(Street Address of Moving Attorney/Party)

\_\_\_\_\_  
(City, State, and Zip Code of Moving Attorney/Party)

\_\_\_\_\_  
(Telephone Number of Moving Attorney/Party)

**PRAECIPES shall be FILED in the Central Assignment Office, Room 1110, at least 7 days before the time set for hearing.**

**COURT USE ONLY (Do Not Write below line)**

\_\_\_\_\_ Adj to \_\_\_\_\_ Adj to \_\_\_\_\_

