

Approved, SCAO

Original – Court
1st copy – Other party
2nd copy – Moving party

3rd copy – Friend of the court
4th copy – Proof of service
5th copy – Proof of service

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

**OBJECTION TO
REFEREE'S RECOMMENDED ORDER**

A

CASE NO.

Court address

Court telephone no.

B	Plaintiff's name, address, and telephone no. <input type="checkbox"/> Moving party
	Third party's name, address, and telephone no. <input type="checkbox"/> Moving party

v

Defendant's name, address and telephone no. <input type="checkbox"/> Moving party

I object to the entry of the referee's recommended order dated **C** _____ and request a de novo review by the court. My objection is based on the following reason(s):

D

E _____
Date

Moving party's signature

Name (type or print)

NOTICE OF HEARING

F A hearing will be held on this objection before Hon. _____
Judge

on _____ at _____ at _____
Date Time Location

If you require special accommodations to use the court because of a disability, or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements. When contacting the court, provide your case number(s).

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this objection and notice of hearing on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 3.203.

G _____
Date

Signature of objecting party