GENERAL MOTION

FORMS	FILING FEE	FILE ONLINE
MC 326 MC 327	$20	mifile.courts.michigan.gov

Complete the Notice of Hearing and Motion

- Case number (at the top of the form)
- Your role in the case: plaintiff or defendant
- Complete the following:
  1. Motion Title: State what you are asking the Court to have changed/enforced. For example: Motion to enforce _____
  2. Moving Party: You are the moving party. Write your name here.
  3. The Court will complete this section.
  4. Motion: This is where you explain what you are asking the Court to change/enforce.

Order

- Case number (at the top of the form)
- Your role in the case: plaintiff or defendant
- Complete the following:
  1. Motion Title: Write exactly what you wrote on the Notice of Hearing and Motion form
  2. Moving Party: Write exactly what you wrote on the Notice of Hearing and Motion form.
  3. The Court will complete this section.
  4. The Court will complete this section.

File electronically

- To find your case, type in only the numbers between the dashes. For example, if your case number is 2026-123456-DM, only type **123456** in the search by case number box**.**
- The filing type is: **Motion**

Approved, SCAO

Original - Court file
1st copy - Assignment clerk/Extra
2nd copy - Friend of the court/Extra
3rd copy - Opposing party
4th copy - Moving party

STATE OF MICHIGAN 20th JUDICIAL CIRCUIT JUDICIAL DISTRICT OTTAWA COUNTY	NOTICE OF HEARING AND MOTION	CASE NO.

Court address
12240 Fillmore St, Rm 50, West Olive, MI 49460

Court telephone no.
616-846-8315

Plaintiff name(s)		Defendant name(s)
Plaintiff's attorney, bar no., address, and telephone no.	v	Defendant's attorney, bar no., address, and telephone no.

NOTICE OF HEARING

1. Motion title: _____
2. Moving party: _____
3. This matter has been placed on the motion calendar for:

Judge	Bar no.	Date	Time
Hearing location ☐ Court address above ☐			

4. If you require special accommodations to use the court because of disabilities, please contact the court immediately to make arrangements.

MOTION

Date

/s/
Signature

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this notice of hearing and motion on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

/s/
Signature

Approved, SCAO

Original - Court file
1st copy - Assignment Clerk/Extra
2nd copy- Friend of the Court/Extra
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STATE OF MICHIGAN 20th JUDICIAL CIRCUIT JUDICIAL DISTRICT OTTAWA COUNTY	ORDER	CASE NO.

Court address
12240 Fillmore St, Rm 50, West Olive, MI 49460

Court telephone no.
616-846-8315

Plaintiff name(s), address(es), and telephone no(s).	v	Defendant name(s), address(es), and telephone no(s).
Plaintiff's attorney, bar no., address, and telephone no.		Defendant's attorney, bar no., address, and telephone no.

1. Motion title: _____

2. Moving party: _____

3. This motion was heard by the Honorable _____ on _____ (Date).

☐ 4. For the reasons stated on the record,

THE COURT ORDERS that the above-named motion is

☐ granted.
☐ granted in part, denied in part.
☐ denied.

☐ The court further orders

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Date

Judge

Bar no.

MC 327 (6/17) **ORDER**