

STATE OF MICHIGAN JUDICIAL CIRCUIT JUDICIAL DISTRICT COUNTY PROBATE	NOTICE OF RECEIVER'S APPLICATION FOR COMPENSATION, FEES, OR EXPENSES (RECEIVERSHIP ESTATE)	CASE NO.
--	---	-----------------

Court address Court telephone no.

Plaintiff(s) name(s), address(es), and telephone no(s).	v	Defendant(s) 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.
<input type="checkbox"/> Probate In the matter of _____		

YOU ARE NOTIFIED:

1. I have been appointed receiver of the receivership estate identified in this case.
2. On _____, I filed an application for compensation payment of fees or expenses
Date
 for my service as receiver. A copy of that application is attached to this notice.
3. You may object to this application. Any objection must be in writing and filed with the court within 7 days after service of this notice. You must serve a copy of your objection on the receiver in accordance with MCR 2.107.
4. If an objection is filed, the court will schedule a hearing on the objection and notify all parties of the scheduled hearing.

Date

Signature of receiver/authorized agent of receiver

Name (type or print)

Address

City, state, zip Telephone no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this notice of receiver's application for compensation, fees, or expenses on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined in MCR 2.107(C)(3).

Date

Signature