

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	REQUEST FOR EXEMPTION FROM USE OF MiFILE AND ORDER	CASE NUMBER and JUDGE
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Court address

Court telephone number

Plaintiff's/Petitioner's name, address, and telephone number	Defendant's/Respondent's name, address, and telephone number v
In the matter of _____	

REQUEST

I am not able to file documents electronically in this case and request that I be exempted from electronic filing because:

 I have the following disability that prevents or limits my ability to use the electronic filing system: I have limited English proficiency and it prevents or limits my ability to use the electronic filing system. I am unable to use the electronic filing system because I am confined by governmental authority through: incarceration in jail or prison detention in a juvenile facility commitment to a medical or mental health facility Other reason(s): Other _____

(Explain in detail why you are requesting an exemption. Use additional sheets if necessary. Attach any supporting documentation.)

I declare under the penalties of perjury that this request has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date _____

Signature _____

Name (type or print) _____

Address _____

City, state, zip _____

Telephone number _____

CLERK'S EXEMPTION

1. The request for exemption from MiFILE under MCR 1.109(G)(3)(h) is approved.

Clerk signature and date _____

ORDER**IT IS ORDERED** that the request for exemption from use of MiFILE is granted. denied.

Judge signature and date _____