

<b>STATE OF MICHIGAN</b> <b>JUDICIAL DISTRICT</b> <b>JUDICIAL CIRCUIT</b> <b>COUNTY</b>	<b>REQUEST FOR EXEMPTION FROM</b> <b>USE OF MIFILE AND ORDER</b>	<b>CASE NUMBER and JUDGE</b>
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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 \_\_\_\_\_

<b>REQUEST</b>
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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

☐ Other reason(s):

(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

<b>ORDER</b>
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**IT IS ORDERED** that the request for exemption from use of MiFILE is ☐ granted.      ☐ denied.

Judge signature and date