

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	MOTION TO REMOVE CASE FROM MEDIATION	CASE NO.
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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.

Probate In the matter of _____

MOTION

1. I object to the order for mediation dated _____ and request a hearing on this objection to set aside the order because _____
Date

- a. the case involves child abuse or neglect.
- b. the case involves domestic abuse, and attorneys for both parties will not be present at the mediation session.
- c. one or both of the parties are unable to negotiate for themselves and are unrepresented by attorneys.
- d. there is reason to believe that one or both of the parties' health or safety would be endangered by mediation.
- e. other: _____
specify

2. I was served with a copy of the order for a mediation on _____ .
Date

Date Signature

NOTICE OF HEARING

1. A hearing has been scheduled on the above motion on _____ at _____
Date Time
at _____ before Hon. _____
Location Bar no.

2. If you require special accommodations to use the court because of disabilities, or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

Date Signature

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this motion 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