

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	INFORMATION FELONY <input type="checkbox"/> AMENDED	JUDGE DISTRICT CASE NO. CIRCUIT CASE NO.
Court address		Court telephone no.
District Court ORI: MI-		Circuit Court ORI: MI-
Defendant's name and address THE PEOPLE OF THE STATE OF MICHIGAN v		Victim or complainant Complaining witness
Codefendant(s) (if known)		Date: On or about
City/Twp./Village	County in Michigan	Defendant TCN Defendant CTN Defendant SID Defendant DOB Put DOB in Ref. No. row 1 on MC 97
Police agency report no.	Charge	Maximum penalty
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL Vehicle Type Defendant DLN Put DLN on Ref. No. row 3 on MC 97
Witnesses		

STATE OF MICHIGAN, COUNTY OF _____ .

IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN: The prosecuting attorney for this county appears before the court and informs the court that on the date and at the location described, the defendant:

and against the peace and dignity of the State of Michigan.

Prosecuting Attorney

By: _____

Date

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	COMPLAINT FELONY <input type="checkbox"/> AMENDED	JUDGE DISTRICT CASE NO. CIRCUIT CASE NO.
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Court address _____ Court telephone no. _____

District Court ORI: MI- _____ Circuit Court ORI: MI- _____

Defendant's name and address THE PEOPLE OF THE STATE OF MICHIGAN v				Victim or complainant	
				Complaining witness	
Codefendant(s) (if known)				Date: On or about	
City/Twp./Village	County in Michigan	Defendant TCN	Defendant CTN	Defendant SID	Defendant DOB Put DOB in Ref. No. row 1 on MC 97
Police agency report no.	Charge			Maximum penalty	
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL	Vehicle Type	Defendant DLN Put DLN on Ref. No. row 3 on MC 97	

Witnesses _____

STATE OF MICHIGAN, COUNTY OF _____ .

The complaining witness says that on the date and at the location described, the defendant, contrary to law,

☐ The complaining witness asks that defendant be summoned and dealt with according to law.

Summons authorized on _____ by: Date
Prosecuting official <input type="checkbox"/> Security for costs posted

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

Complaining witness signature _____
Date _____

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	SUMMONS FELONY	JUDGE DISTRICT CASE NO. CIRCUIT CASE NO.
Court address		Court telephone no.
District Court ORI: MI-		Circuit Court ORI: MI-
Defendant's name and address THE PEOPLE OF THE STATE OF MICHIGAN v		Victim or complainant Complaining witness
Codefendant(s) (if known)		Date: On or about
City/Twp./Village	County in Michigan	Defendant TCN Defendant CTN Defendant SID Defendant DOB Put DOB in Ref. No. row 1 on MC 97
Police agency report no.	Charge	Maximum penalty
<input type="checkbox"/> A sample for chemical testing for DNA identification profiling is on file with the Michigan State Police from a previous case.		<input type="checkbox"/> Oper./Chauf. <input type="checkbox"/> CDL Defendant DLN Put DLN on Ref. No. row 3 on MC 97
Witnesses		

STATE OF MICHIGAN, COUNTY OF _____ .

The complaining witness has filed a sworn complaint in this court stating that on the date and the location described, the defendant, contrary to law,

IN THE NAME OF THE PEOPLE OF ☐ THE STATE OF MICHIGAN ☐ _____

TAKE NOTICE: YOU ARE SUMMONED TO APPEAR for arraignment on _____
Date and time

☐ the address above ☐ _____, Michigan,
Location

before the presiding judge. If you fail to appear, a warrant may be issued for your arrest. This summons expires on the date of hearing. If you require accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

Judge/Magistrate signature and date

Case No. _____

PROOF OF SERVICE

TO PROCESS SERVER: You must serve the copies of the summons, complaint, and any attachments and file proof of service with the court clerk. If you are unable to complete service, you must return this original and all copies to the court clerk.

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE / MAILING

☐ I served ☐ personally ☐ by first-class mail to the defendant's last known address
a copy of the summons and complaint, together with the attachments listed below on:

☐ I have attempted to serve the summons and complaint, together with the attachments listed below, and
have been unable to complete service on:

Defendant's/Household member's name	Date and time of service
Place or address of service	
Attachments (if any)	

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

Service fee \$	Miles traveled	Fee \$	TOTAL FEE \$	Signature
Incorrect address fee \$	Miles traveled	Fee \$		Name (type or print)
				Title (if applicable)

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received service of the summons and complaint, together with

Attachments _____ on _____
Date and time
Signature _____ on behalf of _____

CERTIFICATE OF MAILING BY COURT

I certify that on this date I served a copy of this summons and complaint, together with any attachments on the defendant by first-class mail addressed to his or her last known address as defined in MCR 2.107(C)(3).

Court clerk signature and date

JUVENILE BINDER/TRANSFER

- ☐ 3. Examination was waived on _____ .
Date
- ☐ 4. Examination was held on _____ and it was found that
Date
- ☐ there is probable cause that a life offense occurred and there is probable cause that the juvenile committed the life offense.
- ☐ there is no probable cause that a life offense occurred or there is no probable cause that the juvenile committed the life offense, but some other offense occurred that if committed by an adult would constitute a crime, and there is probable cause to believe the juvenile committed that offense.
- ☐ 5. The juvenile is bound over to circuit court criminal division to appear on _____ at _____ .
Date Time
- ☐ on the charge(s) in the complaint.
- ☐ on the amended charge(s) of _____
- _____ MCL/PACC Code _____
- ☐ 6. This case is transferred to the family division of the circuit court for further proceedings
- ☐ immediately.
- ☐ on _____ at _____ .
Date Time
7. Bond is set in the amount of \$ _____. Type of bond: _____ ☐ Posted

Judge signature and date

CERTIFICATION

I certify that on this date I have transmitted to the _____ circuit court criminal division the prosecutor's authorization for a warrant application, the complaint, a copy of the register of actions, and any recognizances received.

Court clerk signature and date

Note: Send a copy of this bindover to the Michigan State Police Criminal Justice Information Center.