STATE OF MICHIGAN JUDICIAL DISTRICT	ANSWER Civil		CASE NO.
Court address	[		Court telephone no
Plaintiff's name(s), address(es), and telephone no(s).		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.	
☐ Defendant(s), ☐ Attorney for defendant(s), in a	nswer to the complaint, st	(Number paragraphs ate(s): the complaint. Attach	in the answer to correspond to paragraphs in additional sheets if necessary.)
Date		Defendant attorney signature	
		Defendant's signature	
	CERTIFICAT	E OF SERVICE	
I certify that on this date I served a compersonal service.			by s) as defined in MCR 2.107(C)(3).

Signature

Date