

27th Newaygo	<b>STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY</b>	<b>PROOF OF SERVICE/ORAL NOTICE REGARDING PERSONAL PROTECTION ORDER</b>	<b>CASE NO. and Judge</b>
-----------------	--	---	---------------------------

<b>Court address</b>	<b>Court telephone no.</b>
1092 Newell St, PO Box 885, White Cloud MI 49349	231-689-7252

Petitioner's name	v	Respondent's name
Address and telephone no. where court can reach petitioner		Address and telephone no. where court can reach respondent

**PROOF OF SERVICE**

I certify that on \_\_\_\_\_ I personally served \_\_\_\_\_  
Date Respondent's name

at \_\_\_\_\_  
Address or location of service

with a copy of the personal protection order issued on \_\_\_\_\_ by the \_\_\_\_\_  
Date

Circuit Court.

_____	_____
Date	Officer's signature
_____	_____
Law enforcement agency	Name (type or print) ID no.
_____	
Address	
_____	_____
City, state, zip	Telephone no.

**PROOF OF ORAL NOTICE**

I certify that on \_\_\_\_\_ I orally notified \_\_\_\_\_ of  
Date Respondent's name

the existence of a personal protection order issued on \_\_\_\_\_ by the \_\_\_\_\_  
Date

Circuit Court. I also certify that the respondent was advised of the following:

- the specific conduct enjoined.
- the penalties for violating the order.
- where the respondent could obtain a copy of the personal protection order.

_____	_____
Date	Officer's signature
_____	_____
Law enforcement agency	Name (type or print) ID no.
_____	
Address	
_____	_____
City, state, zip	Telephone no.