Original - Court 1st copy - Custodial officer 2nd copy - Transport officer

Approved, SCAO

Court address

3rd copy - Prosecutor 4th copy - Return

STATE OF MICHIGAN JUDICIAL DISTRICT **JUDICIAL CIRCUIT**

WRIT OF HABEAS CORPUS

CASE NO.

Court telephone no.

TO:			, the agency or person having custody of
Name	I.D. no.		Date of birth
☐ To bring prisoner to court in the case of: People of V		☐ To inquire in	nto detention/custody of:
IT IS ORDERED:			
☐ 1. Answer this writ, stating the authority under whether child.	nich you 🗌 res	strain the prisoner	. \square exercise custody over the minor
File your answer with the \Box court \Box juc	dge by		
\Box 2. Deliver the person named in this writ into the c			
for the following purpose:			
Immediately after the prisoner completes his/h	er appearance, t	he prisoner shall	be returned to your custody.
\square 3. Bring the person named in this writ before the	Honorable Name	<u> </u>	Bar no.
at	, 0	n	at
Bring this writ with you.		Date	Time
	ntovostivo vidos t	to also also ave for the	numaca indicated above on
4. Produce the prisoner via compatible two-way in	niteractive video i	echnology for the	purpose indicated above on
Date at at	·		
\square 5. Fees are allowed in the amount of \$	·		
Date	Judge	3	Bar no.
	PROOF OF SEF	RVICE	
STATE OF MICHIGAN, COUNTY OF			
I certify that on	at	, I p	ersonally served the original writ of habeas
	Time		
corpus onName		·	
Date	Signa	ature	

WRIT OF HABEAS CORPUS	-
Case No.	

Required only under MCR 3.303	ANSV	VER		
STATE OF MICHIGAN, COUNTY OF	=			
I, Name	, state			
1. I do not have		unc	der my custody, power, or restraint.	
\square 2. On $_$ by a	uthority of □ released.			,
	was Transferred to	Location	(exhibits attached).	
3. I have Person named in writ		under m	y custody, power, or restraint under a	
☐ warrant charging the prisone☐ commitment☐ other:				_
issued by Name		A copy of	the document is attached and the origin	al
will be produced at the hearing.				
I declare that the statements above a	re true to the best of my inf	formation, knowledge	, and belief.	
Date		Signature		
		Title		
When required by MCR 3.303(L)(2)	NOTICE TO PROSEC	UTING ATTORNEY		
TO: The prosecuting attorney of		Cou	unty	
You are notified that the annexed wri is believed to have custody of the pris	t of habeas corpus has bee soner.	n issued. Name/Title/Ag	gency	
Date		Prisoner Attorn	ney/Bar no.	
Address				
City, state, zip	Telephone no.			