

** This Stipulation and Order may be faxed to (517) 552-2312; Attention FOC Secretary*

LIVINGSTON COUNTY
44th CIRCUIT COURT

204 S. Highlander Way, Howell, MI 48843

(517) 546-9816

ADJOURNMENT OF MOTION

CASE NO.

JUDGE

Plaintiff Name, Address, Phone

Defendant Name, Address, Phone

STIPULATION AND REQUEST

Parties agree to the adjournment of: plaintiffs' / defendants' motion entitled;
 , presently set for
hearing on _____ at _____, before _____.

This is the: 1st, 2nd, 3rd, or ___ adjournment of this matter.
Parties request an Order For Adjournment because

Parties request that the Court grant an adjournment of this motion.
Parties by their signature below agree to the entry of an Order for Adjournment.

Plaintiff / Attorney Signature (Date) Defendant / Attorney Signature (Date)

***REFEREE RECOMMENDATION**
***Must obtain referee approval for FOC Motions**

Referee approves / opposes an Order For Adjournment, for the following reasons:

Date Signature

ORDER

IT IS ORDERED: Request for adjournment by stipulation is granted, and the above stated motion is adjourned to the date specified in the Notice below.

Costs are assessed _____. This request is denied.

Date Judge

NOTICE OF ADJOURNED DATE / CERTIFICATE OF MAILING

The above adjourned motion is reset for hearing to _____, at _____
before _____. A copy of this Stipulation, Order, and Notice is being mailed
to the parties, or their attorneys, by ordinary mail at the above addresses.

Date Deputy Clerk

