STATE OF MICHIGAN 6th JUDICIAL CIRCUIT COUNTY OF OAKLAND

VERIFIED STATEMENT RE: PPO ACTION

A				
		N	n	

1200 N. TELEGRAPH RD. PONTIAC. MI 48341

VERIFIED STATEMENT-2 (08/28/2020)

(248) 975-9511

PETITIONER INFORMAT	ΓΙΟΝ			RESPONDENT INFORMATION		
NAME	AGE	v	NAME			
]			
ALIAS (es) (Other names that have been used no	ow or in the	e past)	-	ALIAS (es) (Other names that have been	l n used now or in the past)	
COUNTY OF RESIDENCE				COUNTY OF RESIDENCE		
Do you or have you lived together: What is your relationship with the respond	☐ Yes dent?	□ N	lo.			
Spouse, Former spouse, neighbor, co-worker, etc.						
Do you and respondent have child(ren) to	ogether	☐ Yes	□ N	o If yes , list the children you h	have together below:	
NAME OF CHILD	DATE	OF BIRTH		CURRENT ADDRE	ESS	
1.						
2.						
3.						
NOTE: If you have additional children, please attac	h a separa	te list to this d	ocume	nt		
List all other children that either of you ha	edgment of r in effect Custody a	t regarding and Parenti	child(ng Ti	ren) that you and respondent have me for PPO worksheet.	otogether?	
Step-children, adopted children, etc.						
Have you or respondent ever asked for a What county When Why Have you or respondent ever been to cou What county When Why	urt in and	other county	<i>ı</i> ?	Yes No		
Does the respondent have a license to calls the respondent employed or in training is the respondent an employee of a law else the respondent an employee of the De	for a pos enforcem	sition which	will ı ? [equire him/her to carry a firearm? Yes	y?	
VERIFICATION UNDER MCR 1.109: I dand belief.	eclare th	at the state	ment	above are true to the best of my i	information, knowledge	
			/s/			
Date			Sic	nature of petitioner		