Original – Circuit Court 1st copy – DAH 2nd copy – Appellee 3rd copy – Appellant

STATE OF MICHIGAN

THIRD JUDICIAL CIRCUIT WAYNE COUNTY	CLAIM OF APPEAL **BLIGHT APPEAL**		CASE NO.:	
			CIRCUIT: DAH:	
Address: 2 Woodward Avenue, 201 CAYM	C, Detroit, Michigan 48226		Telephone No. 313-224-5510	
Plaintiff's Name, address and telephone no.	pellant	Respondent's Na	ame, address and telephone no.	☐ Appellant ☐ Appellee
Attorney, bar no., address, and telephone no.		Attorney, bar no.	, address, and telephone no.	
1in the DEPARTME . Michigan, Date	, claims a		final judgment or order ent	ered on
by Department of Appeals and Hearings (DAH)	Hearing Officer			 Bar No.
2. Bond on appeal is \Box filed. \Box attached.	□ waived. □ no	t required.		But 110.
3. □ a. A transcript has been ordered.				
☐ b. No record was made.				
Date	App	pellant/Attorney sign	gnature	
Address	City ROOF OF SERVICE	, state, zip	Telephone No.	
I certify that I served a copy of this claim of appeal			☐ personal service. by ☐ first class mail.	
Name	on Date	U		
	on	ŀ	□ personal service.□ first class mail.	
Name	Date	·		
	on	b	□ personal service.□ first class mail.	
Name	Date		<u>, </u>	
Date	Signature			