

<b>STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY</b>	<b>PROOF OF PERSONAL SERVICE/ORAL NOTICE (EXTREME RISK PROTECTION ORDER)</b>	<b>CASE NO. and JUDGE</b>
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Court address Court telephone no.

Petitioner's name and telephone no.	<b>v</b>	Respondent's name, address, and telephone no.
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**TO LAW ENFORCEMENT OFFICER:** You must file this completed proof of service with the clerk of the court that issued the extreme risk protection order within one business day after service or notification.

**PROOF OF PERSONAL SERVICE**

I certify that on \_\_\_\_\_ at \_\_\_\_\_ I personally served  
Date Time  
 \_\_\_\_\_ at \_\_\_\_\_  
Respondent's name Address or location of service  
 with a copy of the extreme risk protection order issued on \_\_\_\_\_ by the \_\_\_\_\_  
Date  
 Court.

I also served a copy of the summons and complaint for this proceeding.

_____	_____
<small>Date</small>	<small>Law enforcement officer's signature</small>
_____	_____
<small>Law enforcement agency</small>	<small>Name (type or print) <span style="float: right;">ID no.</span></small>
_____	_____
<small>Address</small>	<small>City, state, zip <span style="float: right;">Telephone no.</span></small>

**PROOF OF ORAL NOTICE**

I certify that on \_\_\_\_\_ at \_\_\_\_\_ I orally notified  
Date Time  
 \_\_\_\_\_ of the existence of an extreme risk protection order  
Respondent's name  
 issued on \_\_\_\_\_ by the \_\_\_\_\_ Court. I also certify that I advised the respondent  
Date  
 of:

- the specific conduct enjoined.
- the penalties for violating the order.
- where they may obtain a copy of the extreme risk protection order.

_____	_____
<small>Date</small>	<small>Law enforcement officer's signature</small>
_____	_____
<small>Law enforcement agency</small>	<small>Name (type or print) <span style="float: right;">ID no.</span></small>
_____	_____
<small>Address</small>	<small>City, state, zip <span style="float: right;">Telephone no.</span></small>