Original - Court 1st Copy- Defendant 2nd Copy - Plaintiff 3rd Copy -Return

	1st Copy- Defendant		3rd Copy -Return
STATE OF MICHIGAN THIRD JUDICIAL CIRCUIT WAYNE COUNTY	SUMMONS		CASE NO. 22-006179-NO Hon.David J. Allen
Court address : 2 Woodward Ave., Detroit MI 48226			Court telephone no.: 313-224-025
Plaintiff's name(s), address(es), and telephone no(s) Brys, Daniel			t's name(s), address(es), and telephone no(s). Grosse Pointe Woods
Plaintiff's attorney, bar no., address, and telephone n	0		
Randy J. Wallace 57556 2684 11 Mile Rd Berkley, MI 48072-3050			
Instructions: Check the items below that apply to y your complaint and, if necessary, a case inventory a	rou and provide any required addendum (form MC 21). The	information summon	on. Submit this form to the court clerk along with is section will be completed by the court clerk.
Domestic Relations Case  ☐ There are no pending or resolved cases within members of the person(s) who are the subject of the person of the set (form MC 21) listing those cases.  ☐ It is unknown if there are pending or resolved or or family members of the person of th	of the complaint. Is within the jurisdiction of the subject of the complaint. I have ases within the jurisdiction of e subject of the complaint.	family di e separat the famil or comm	vision of the circuit court involving the family or ely filed a completed confidential case inventory y division of the circuit court involving the family ercial dispute under MCL 600.8035
☐ MDHHS and a contracted health plan may hav complaint will be provided to MDHHS and (if ap ☐ There is no other pending or resolved civil actio ☐ A civil action between these parties or other par	plicable) the contracted healt in arising out of the same tran	th plan in rsaction c	accordance with MCL 400.106(4). or occurrence as alleged in the complaint.
been previously filed in 🛘 this court, 🔻			Court,
where it was given case number	and assigned to Jud	ge	·
The action $\square$ remains $\square$ is no longer pending	ng.		
Summons section completed by court clerk.	SUMMONS		
<ol> <li>NOTICE TO THE DEFENDANT: In the name of the state of the state.</li> <li>You HAVE 21 DAYS after receiving this summor copy on the other party or take other lawful activation state.</li> <li>If you do not answer or take other action within the complaint.</li> <li>If you require special accommodations to use the you fully participate in court proceedings, please</li> </ol>	ins and a copy of the complation with the court (28 days in the time allowed, judgment matcourt because of a disability	nint to file if you wer ay be ente or if you r	a written answer with the court and serve a re served by mail or you were served outside ered against you for the relief demanded in the require a foreign language interpreter to help
	Expiration date* 8/23/2022		Court clerk averne Chapman

Cathy M. Garrett- Wayne County Clerk.

\*This summons is invalid unless served on or before its expiration date. This document must be sealed by the seal of the court.



SUMMONS Case No. : 22-006179-NO

## **PROOF OF SERVICE**

TO PROCESS SERVER: You are to serve the summons and complaint not later than 91 days from the date of filing or the date of expiration on the order for second summons. You must make and file your return with the court clerk. If you are unable to complete service you must return this original and all copies to the court clerk.

## CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE

	OFFICER C	ERTIFIC	ATE	OR		AFFIDAVIT OF PROCESS SERVER	
I certify that I am a sheriff, deputy sheriff, bailiff, appointed court officer, or attorney for a party (MCR 2.104[A][2]), and that: (notarization not required)					Being first duly sworn, I state that I am a legally competent adult, and I am not a party or an officer of a corporate party (MCR 2.103[A]), and that: (notarization required)		
☐ I served perso	nally a copy of th	ne summoi	ns and complaint.		V 451.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.		
I served by reg						summons and complaint,	
_	List all do	cuments se	rved with the Summons	and Comp	laint		
						on the defendant(s):	
Defendant's name	9		Complete address	s(es) of se	rvice	Day, date, time	
					<del></del>		
	lly attempted to s ble to complete s		summons and compla	int, togeth	er with any	attachments, on the following defendant(s) and	
Defendant's name			Complete address	Complete address(es) of service		Day, date, time	
I declare under the information, knowledge	e penalties of per edge, and belief.	jury that th	is proof of service ha	s been ex	amined by n	ne and that its contents are true to the best of my	
Service fee \$	Miles traveled	Fee \$		Sig	nature		
Incorrect address fee \$	Miles traveled	Fee \$	Total fee \$	Na	me (type or	print)	
		-l		Titl	e		
Subscribed and swe	orn to before me		Date ,	<del></del>		County, Michigan.	
My commission exp	ires:		Signature: _		Denuty cor	rt clerk/Notary public	
Notary public, State		unty of			, -		
			ACKNOWLED	GMENT	OF SERVI	DE	
acknowledge that i	have received s	ervice of ti	he summons and com	nplaint, to	gether with	Attachments	
			on				
					Day, date		
Signature			on b	ehalf of _			