

**STATE OF MICHIGAN**  
**63 JUDICIAL DISTRICT**

**CLAIM OF APPEAL OF RIGHT/REQUEST TO**  
**WITHDRAW ADMISSION, Civil Infraction**

**CASE NO.**

Court address

Court telephone no.

Civil infraction: \_\_\_\_\_ Infraction date: \_\_\_\_\_

The  State  Twp.  City  Village of: \_\_\_\_\_  Statute  Ordinance

v

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Plaintiff  requests to withdraw the admission  
 Defendant  claims an appeal from the judgement  
entered on \_\_\_\_\_ in this court, by the  
Date

violations bureau.  
 magistrate.  
 district judge.

SECURITY FOR APPEAL	
<input type="checkbox"/>	Bond is set at \$ _____
<input type="checkbox"/>	Bond Posted _____ Date
<input type="checkbox"/>	Fine and costs of \$ _____ were paid on _____ Date
<input type="checkbox"/>	Plaintiff's appeal; no security required.

\_\_\_\_\_ Date Applicant

\_\_\_\_\_ Address