



16<sup>th</sup> District Court  
32765 Five Mile Rd., Livonia, MI 48154 (734) 466-2500 fax (734) 522-6744

### Request for Certified Copy of Conviction

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Today's Date: \_\_\_\_\_

Defendant's Name: \_\_\_\_\_

Defendant's Current Address: \_\_\_\_\_  
\_\_\_\_\_

Defendant's Phone Number: \_\_\_\_\_

Defendant's Date of Birth: \_\_\_\_\_

Charge: \_\_\_\_\_

Date of Offense: \_\_\_\_\_

Date of Conviction: \_\_\_\_\_

Case Number if Available: \_\_\_\_\_

Is this certified being mailed out of state?      Yes      No

Are you wanting to set aside the conviction?      Yes      No

Requesting Party: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

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**FOR COURT USE ONLY**

Certified Copies \$10.00 per Certified

Total Due: \_\_\_\_\_

Court Clerk's Initials: \_\_\_\_\_

NOTE:

Michigan law does not require that you place your name and address on this form. This form information is required to facilitate the processing of your request. Requests will be accommodated within a reasonable amount of time determined by the nature of the request and the availability of the court staff.

**\*\* DEFENDANT'S GOVERNMENT ISSUED I.D. IS REQUIRED FOR UNREDACTED CERTIFIED COPY OF CONVICTION \*\***

Per MCL 600.2546 "all certified copies, and exemplifications of records, pleadings and proceedings furnished on request, where no special provision is otherwise made, the fee is \$10.00 plus \$1.00 per page."