42-2 DISTRICT COURT TRAVEL REQUEST

NAME:	
CASE#:	·
PHONE #:	
DATE OF DEPARTURE	•
DATE OF RETURN: DESTINATION (state/country):	
DATE:	DEFENDANT'S SIGNATURE
For Court Purpose O	nly:
PROBATION APPLY VINDIVIDUALS MUST	ONDITONS OF YOUR BOND OR WHILE OUT OF MICHIGAN. ALL TEST UPON RETURN FROM TRAVEL AND PRIOR TO LEAVING MICHIGAN**
Sober link x	day No testing required
Testing upon ret	urn
REQUEST IS HEREBY GRANTED:	DENIED:
DATE:	JUDGE'S SIGNATURE