Original – County Clerk 1<sup>st</sup> Copy – County Clerk (to mail to victim) 2<sup>nd</sup> Copy – Defendant 3<sup>rd</sup> Copy - Garnishee

STATE OF MICHIGAN		IT ON (	GARNISHMENT	CASE NO.		
JUDICIAL DISTRICT OF PERIOD			_	-		
JUDICIAL CIRCUIT						
Court Address: 1441 St. Antoine, 901 FMHJ, Detroit, MI 48226				Court Telephone No.		
PEOPLE OF THE STATE OF MICHIGAN				Defendant's name a	nd address (judgment debtor)	
			v			
			\ \ \			
Victim's Name (for security reasons, please only place the victim's name in this box)				Garnishee's name ar	nd address	
When to complete and file this form:						
If you are the defendant's employer, this statement is to be filed within 14 days after the victim's judgment/ordered restitution						
is satisfied, regardless of changes in the employment status of the defendant during the time that the writ was in effect.						
If you are not the defendant's employer, this statement is to be filed within 14 days after the victim's judgment/ordered						
restitution is satisfied or you are no longer obligated to make payments to the defendant.						
1. This final statement is for a writ of garnishment issued on						
Date Issued						
2. Amount stated on line 2. of Request for Writ of Garnishment						
2. Amount stated on line 2. of Request for Writ of Garnishment \$						
Less total amount withheld under this writ \$						
					_	
Difference				\$ <u>0.00</u>	<u>-</u> ·	
Date Garnishee/Agent/Attorney signature						
CERTIFICATE OF MAILING						
I coulify that our						
I certify that on:						
I mailed or personally delivered the original and a copy of this final statement with the County Clerk.						
I mailed or personally delivered a copy of this final statement to the defendant.						
Date of Issue		Garnishee / Ac	zent / Δt	torney Signature		