

STATE OF MICHIGAN THIRD JUDICIAL CIRCUIT WAYNE COUNTY	GARNISHMENT RELEASE	CASE NO.
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Court Address 1441 St. Antoine, Detroit, MI 48226 Courtroom

PEOPLE OF THE STATE OF MICHIGAN
Victim's Name (for security reasons, please use only the victim's name in this box)

v

Defendant name and address
Garnishee name and address

** ** Insert last 4 digits of Defendant's social security number here.

TO THE GARNISHEE:

- 1. The garnishment issued on _____ is withdrawn by the victim.
Date
The withdrawal was authorized on _____ by _____
Date Victim/Victim Attorney
- 2. The garnishment issued on _____ is cancelled by the court.
Date
- 3. You are released from further liability in connection with this garnishment.
- 4. Any amounts withheld by the garnishee on or after _____ shall be returned to the defendant and
any further withholdings shall be discontinued. Date

Date

Deputy Court Clerk

CERTIFICATE OF MAILING

I certify that on this date this release was served on the garnishee, the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3) and Claudia Wilson, 707 CAYMC, Detroit, MI 48226.

Date

Signature

****TO THE VICTIM:** In the social security number field, for security reasons, use only the last four digits of the defendant's social security number.