## **VICTIM INFORMATION SHEET**

Case Number:	
Case Name: People of the State of Michigan	V
For the protection of the victim, please information on the Request and Writ for Gar	
Victim Name:	·
Victim Address:	
Victim Phone Number:	
Victim Email Address:	
This sheet shall be filed/mailed with the Rethe following two offices:	equest and Writ for Garnishment with
1) County Clerk, 5301 Russell Street, S	te100. Detroit, MI 48211; and
<ol> <li>Third Judicial Circuit Court Collection</li> <li>MI 48211.</li> </ol>	ons, 5301 Russell, Ste 1132, Detroit,
The Clerk shall maintain this Victim Information	ation Sheet in a non-case record file.
Victim/Attorney signature	Date