

Approved, SCAO

• **STATE OF MICHIGAN**
JUDICIAL DISTRICT
JUDICIAL CIRCUIT
54TH A

REQUEST AND WRIT FOR GARNISHMENT
(PERIODIC)

• **CASE NO.**

1900773GCE

Court address

• Zip code

Court telephone no.

124 WEST MICHIGAN AVE, LANSING, MI 48933

5174834426

Plaintiff's name and address (judgment creditor)

EDWARD W. SPARROW HOSPITAL ASSOC.
1100 W. SAGINAW
LANSING, MI 48915

Plaintiff's attorney, bar no., and address

John D. Bradshaw, P.C. (P39813)
107 W. Michigan Ave, 6th Floor
Kalamazoo, MI 49007

Telephone no. (269) 373-4400

Defendant's name and address (judgment debtor)

DANIEL AUSTIN
2507 W WASHTENAW ST
LANSING, MI 48917

Social security no.

427693646

Employee ID or account no.

Garnishee name and address

LLPS, INC Joseph
ATTN: RIA Jason Fata
6323 W SAGINAW HWY, Ste E
LANSING, MI 48917

REQUEST See separate instructions.

1. Plaintiff received judgment against defendant for \$ \$2,190.85 on 06/25/19.
2. The total amount of judgment interest accrued to date is \$ \$60.16. The total amount of postjudgment costs accrued to date is \$ \$78.55. The total amount of postjudgment payments made and credits to date is \$ \$0.00. The amount of the unsatisfied judgment now due (including interest and costs) is \$ \$2,329.56.
3. Plaintiff knows or with good reason believes the garnishee is indebted to or possesses or controls property belonging to defendant.
4. Plaintiff requests a writ of periodic garnishment.

I declare that the statements above are true to the best of my information, knowledge, and belief.

FEB 11, 2020

Date

Plaintiff/Agent/Attorney signature

WRIT OF GARNISHMENT

IT IS ORDERED:

TO THE PLAINTIFF: Have all copies of the Garnishee Disclosure (form MC 14), two copies of this writ, and a disclosure fee (\$6 if the State of Michigan is the garnishee; \$35 for all others) served on the garnishee within 182 days from the date of issue. If not properly served, the writ of garnishment is invalid. After receiving your first payment under the garnishment, provide the garnishee and defendant a statement of the balance remaining on the judgment, including interest and costs, at least once every 6 months. Within 21 days after the judgment has been paid, including all interest and costs, provide the garnishee and defendant a garnishment release (form MC 50).

TO THE DEFENDANT: See separate instructions. You have 14 days after this writ is mailed or delivered to you to file objections with the court. If you do not file objections within this time, periodic payments (money) owed to you by the garnishee may be withheld and paid directly to the plaintiff until the judgment is satisfied.

TO THE GARNISHEE:

1. Within 7 days after you are served with this writ, deliver a copy of this writ to the defendant in person or mail a copy to his or her last-known address by first-class mail.
2. Within 14 days after you are served with this writ, deliver or mail copies of your completed Garnishee Disclosure (form MC14) to the court, plaintiff/attorney, and defendant. A default may be entered against you for failure to disclose.
3. Do not pay any obligations to the defendant unless allowed by statute or court rule.
4. If indebted to the defendant, withholding must begin according to court rule and continue until the judgment is satisfied. Unless satisfied that an objection has been filed, begin forwarding withheld payments 28 days after you are served with this writ.

You are ordered to make all payments withheld under this writ payable to:

and mail them to: ☒ the plaintiff ☐ the plaintiff's attorney ☐ the court
☐ the plaintiff ☒ the plaintiff's attorney ☐ the court.

5. Within 14 days after the judgment is satisfied or you are no longer obligated to make periodic payments to the defendant, file a final statement of the total amount paid on this writ with the court and mail or deliver copies to the plaintiff/attorney and defendant.

Date of issue

Date of deadline for service
(182 days from date of issue)

Clerk of the court/Deputy

Approved, SCAO

Original - Court
1st copy - Plaintiff2nd copy - Defendant
3rd copy - GarnisheeSTATE OF MICHIGAN
JUDICIAL DISTRICT
JUDICIAL CIRCUITFINAL STATEMENT ON GARNISHMENT
OF PERIODIC PAYMENTS

CASE NO.

54TH A

1900773GCE

Court address

Court telephone no.

124 WEST MICHIGAN AVE, LANSING, MI 48933

5174834426

Plaintiff's name and address (judgment creditor)

EDWARD W. SPARROW HOSPITAL ASSOC
1100 W. SAGINAW
LANSING, MI 48915

Defendant's name and address (judgment debtor)

DANIEL AUSTIN
2507 W WASHTENAW ST
LANSING, MI 48917

Plaintiff's attorney, bar no., address, and telephone no.

John D. Bradshaw, P.C. P39813
107 W. Michigan Ave 6th Floor
Kalamazoo, MI 49007
(269) 373-4400

Garnishee's name and address

LLPS, INC Joseph
ATTN: RIA Jason Fala
6323 W SAGINAW HWY, Ste E
LANSING, MI 48917

When to complete and file this form:

Within 14 days after the writ ceases to be effective under MCR 3.101(B)(1) or after the garnishee is no longer obligated to make periodic payments, the garnishee shall file with the court and mail or deliver to the plaintiff and the defendant a final statement of the total amount paid on the writ. If the garnishee is the defendant's employer, the statement is to be filed within 14 days after the writ ceases to be effective, regardless of changes in employment status during the time that the writ was in effect.

1. The total amount withheld under this writ is \$ 2329.56

Date of statement

Garnishee/Agent/Attorney signature

CERTIFICATE OF MAILING

I certify that on:

Date 2/24/20 I mailed or personally delivered a copy of this final statement with the court.Date 2/24/20 I mailed or personally delivered a copy of this final statement to the plaintiff/attorney.Date 2/24/20 I mailed or personally delivered a copy of this final statement to the defendant.

Date

Garnishee/Agent/Attorney signature

Approved, SCAO

Original - Court
1st copy - Plaintiff
2nd copy - Garnishee
3rd copy - Defendant

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|---|-----------------------------|-------------------------------|
| STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT | GARNISHEE DISCLOSURE | CASE NO. 19007736CE |
|---|-----------------------------|-------------------------------|

Court address 124 WEST MICHIGAN AVE, LANSING, MI 48933 Court telephone no. 5174834426

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|---|--|
| Plaintiff's name, address, and telephone no. (judgment creditor) EDWARD W. SPARROW HOSPITAL ASSOC 1100 W. SAGINAW LANSING, MI 48915 | Defendant's name, address, and telephone no. (judgment debtor) DANIEL JUSTIN 2507 W. WASHTENAW ST LANSING, MI 48917 |
| Plaintiff's attorney, bar no., address, and telephone no. John D. Bradshaw, P.C. (B39813) 107 W. Michigan Ave, 6th Floor Kalamazoo, MI 49007 | Garnishee name and address LLPS, INC ATTN: RIA Joseph Fata 6323 W SAGINAW HWY, Ste E LANSING, MI 48917 |

SEE INSTRUCTIONS ON OTHER SIDE

1. This disclosure is for a writ of garnishment issued on _____ and received by garnishee on _____.
☐ a. The garnishee mailed or delivered a copy of the writ of garnishment to the defendant on _____.
☐ b. The garnishee was unable to mail or deliver a copy of the writ of garnishment to the defendant.
☐ c. The garnishee will not withhold payments under the writ of garnishment. The writ of garnishment was served after the deadline date for service and the writ is invalid.

2. At the time of service of the writ:
Nonperiodic Garnishments
☐ a. The garnishee is not indebted to the defendant for any amount and does not possess or control the defendant's property, money, etc. Reason: _____
☐ b. The garnishee is indebted to the defendant for nonperiodic payments as follows: _____

Description of property, money, negotiable instruments, etc. under garnishee's control _____ Type of account and account number, if applicable _____
The amount to be withheld is \$ _____ and does not exceed the amount stated in item 2 of the writ.

- ☐ c. Withholding is exempt because _____
Periodic Garnishments State the exemption and legal authority _____

- ☐ d. The garnishee is not obligated to pay the defendant during the period of the writ.
Reason: ☐ not employed. ☐ other _____

- ☒ e. The garnishee is obligated to pay the defendant during the period of the writ.
Payments are for ☒ earnings. ☐ nonearnings _____

Specify nature of payment (see instructions on other side)
Payments are made ☒ weekly. ☐ biweekly. ☐ semimonthly. ☐ monthly. ☐ other: _____ frequency of payment

A higher priority writ/order ☐ is ☐ is not currently in effect. If a higher priority writ/order is in effect, complete the following.

| Name of court that issued higher priority writ/order | Case number | Date issued | Date served |
|--|-------------|-------------|-------------|
|--|-------------|-------------|-------------|

Withholding under this writ
☒ will begin immediately if sufficient funds are available.

☐ will not begin immediately because defendant is ☐ laid off. ☐ sick. ☐ on leave. ☐ other: _____ specify

I declare that the statements above are true to the best of my information, knowledge, and belief.

Date 2/24/20 Garnishee/Agent/Attorney signature [Signature]

I certify that:
on 2/24/20 I mailed or personally delivered the original of this disclosure to the court.
on 2/24/20 I mailed or personally delivered a copy of this disclosure to the plaintiff/attorney.
on 2/24/20 I mailed or personally delivered a copy of this disclosure to the defendant.

Date 2/24/20 Garnishee/Agent/Attorney signature [Signature]

DO NOT Include Your Payment With This Disclosure. See item 3 of the instructions for details.

You do not need to use this calculation sheet. If you do, it does not need to be filed with the court or provided to the defendant and plaintiff. However, you must maintain some type of record of your payment calculations and make it available for review by the plaintiff, defendant, or court upon request.

GARNISHEE CALCULATION SHEET FOR EARNINGS

1. The employer's current payday is _____. The principal defendant's gross earnings from the employer that were earned for this pay period are: \$ _____

2. Deductions required by law to be withheld from gross earnings shown on line 1:
 - a. Federal withholding tax (for income tax) \$ _____
 - b. State withholding tax (for income tax) \$ _____
 - c. Employee portion of social security tax \$ _____
 - d. Employee portion of medicare tax \$ _____
 - e. City withholding tax (for income tax) \$ _____
 - f. Public employee retirement when required by law \$ _____
 - g. Total (add lines 2a through 2f) \$ _____

3. **Disposable earnings** (subtract line 2g from line 1) \$ _____

4. **Test I** for amount available for garnishment (25% of line 3): \$ _____
 (this percentage does not apply to garnishments for support of a person)

5. **Test II** for amount available for garnishment (disposable earnings minus federal minimum wage multiplied by appropriate multiple for normal pay period):
 - a. Locate the appropriate figure from the chart below and insert here \$ _____
 - b. Subtract amount on line 5a from amount on line 3. Insert amount here. \$ _____
 If the amount is less than zero, enter -0-.

6. **Maximum amount subject to garnishment** (line 4 or 5b, whichever is less) \$ _____

7. **Amounts withheld from disposable earnings** (see line 3) pursuant to orders with priority:
 - a. Orders of bankruptcy court \$ _____
 - b. Orders for past due federal or state taxes \$ _____
 - c. Income withholding for support of any person \$ _____
 - d. Other general garnishments served prior to this writ \$ _____
 - e. Total of all priority amounts withheld (add lines 7a through 7d) \$ _____

8. **Amount subject to garnishment under this writ** (subtract line 7e from line 6) \$ _____

9. **Amount to be withheld in response to this writ** (line 8 above or line 2 on the request and writ for garnishment, whichever is less) \$ _____

Chart *

| | |
|---|---------------|
| Test II for Amount Available for Garnishment Beginning: | July 24, 2009 |
| Weekly (or more frequently) pay period | \$217.50 |
| Biweekly pay period | \$435.00 |
| Semimonthly pay period | \$471.25 |
| Monthly pay period | \$942.50 |

*Training wage: for person aged 16 to 19 on their first job, use 85% of the above figures.