

Payment Plans

Michigan Court Rule 1.110 Collection of Fines and Costs

Fines, costs, and other financial obligations imposed by the court must be paid at the time of assessment, except when the court allows otherwise, for good cause shown.

**ISABELLA COUNTY TRIAL COURT COLLECTIONS
DISTRICT COURT DIVISION**

Annual Collections	Money Assessed	F&C Collected	Restitution Collected	Total Collected F&C / Restitution	Collected over Assessed
June 02-May 03	\$2,574,923.22	\$2,763,293.25	\$63,120.17	\$2,826,413.42	\$251,490.20
June 03-May 04	\$2,805,786.16	\$2,916,977.70	\$104,345.70	\$3,021,323.40	\$193,429.55
Commenced Collections Program					
June 04-May 05	\$3,056,671.13	\$3,474,866.85	\$84,534.95	\$3,559,401.80	\$503,821.02
June 05-May 06	\$2,523,682.87	\$2,980,013.47	\$95,907.12	\$3,075,920.59	\$452,237.72
June 06-May 07	\$2,492,274.02	\$2,819,737.66	\$117,780.11	\$2,937,517.77	\$445,243.75
June 07-May 08	\$2,369,606.98	\$2,756,599.14	\$109,588.13	\$2,866,198.29	\$496,591.31

**AFFIDAVIT AND
DEFENDANT'S FINANCIAL STATEMENT**

Isabella County Trial Court
300 North Main Street
Mt. Pleasant, MI 48858
(989) 772-0911

Thoroughly and legibly complete this Affidavit and Defendant's Financial Statement. **Do not leave any blanks.** If an item does not pertain to you, fill in "N/A" for not applicable.

WARNING: It is a felony to intentionally submit false information to a Court. The maximum penalty is 15 years in prison. MCL 750.423

DEFENDANT				
Name: (First, Middle, Last)			Maiden Name:	
Social Security No.:	Date of Birth:	Age:	Student:	College/University/School:
			Part Time ____	
			Full Time ____	
Current Address:			How Long? _____	
Previous Address:			How Long? _____	
Permanent Mailing Address: (If student, list <u>parent's name and address and telephone number</u>)				
Home Phone:	Cell Phone:	Work Phone:	Message Phone:	
Driver's License No:	State:	Expiration Date:	Marital Status:	
			Single ____ Married ____ Divorced ____	
			Window(er) ____ Separated ____	
No. of Dependents:				
Spouse: ____		Children (ages): _____		
		Other (Relationship) _____		
Employer: (<u>Name and address</u>)		Supervisor's Name:		Phone No.:
How Long Employed?	Your Title:	Hours per Week:	Hourly Rate:	
			\$ _____	
Pay Schedule:			Date of Next Check:	

DEFENDANT

Weekly ___ Bi-Weekly ___ Other _____

Payroll Deductions: Health Ins. ___ Savings ___ Garnishments ___ Life Ins. ___ Child Support ___
Other _____

If Unemployed, Your Trade: _____ How Long Have You Been Unemployed? _____

Military: (Branch) _____ Rank: _____ No. of Years _____

Company/Unit Assigned to: _____ First Sgt.: _____ Phone No.: _____ Serial No. _____

SPOUSE

Name: (First, Middle, Last) _____ Nickname or Maiden Name: _____

Employer: (Name and address) _____ Supervisor's Name: _____ Phone No.: _____

How Long Employed? _____ Job Title: _____ Hours per Week: _____ Hourly Rate: _____
\$ _____

Pay Schedule: _____ Date of Next Check: _____
Weekly ___ Bi-Weekly ___ Other _____

Social Security No: _____

Monthly Income Received	Monthly Expenses Paid
Net Take-Home Pay (Self) \$ _____	Mortgage/Rent \$ _____
Net Take-Home Pay (Spouse) _____	Utilities
Unemployment _____	Electric _____
Worker's Compensation _____	Gas _____
Welfare _____	Phone _____
Social Security _____	Water _____
Retirement/Pension _____	Total: _____
Child Support _____	Vehicle Loan _____
Alimony/Maintenance _____	Vehicle Insurance _____
Disability _____	Life/Health Insurance _____
Veteran's Benefits _____	Credit Cards _____
Parents _____	Loans (personal, student, bank) _____
Accident Benefits _____	Medical _____
Allotment Checks _____	Child Care _____
Interest Income _____	Child Support _____
Dividends _____	Other: _____
Other: _____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Other: _____	_____
_____	_____
_____	_____
Total Monthly Household Income \$ _____	Total Monthly Household Expenses \$ _____

Detailed Monthly Expenses	Status C-Current P-Past Due	Amount Owing	Due Date	Monthly Pmt
Landlord's Name, Address, Phone No.:				
Bank: (Lending Institution Name, Address, Phone No.) Type of Loan: _____				
Credit Card: (Financial Institution) ___ Visa ___ MasterCard ___ Other _____ Credit Limit: _____				
Credit Card: (Financial Institution) ___ Visa ___ MasterCard ___ Other _____ Credit Limit: _____				
Credit Card: (Financial Institution) ___ Visa ___ MasterCard ___ Other _____ Credit Limit: _____				
Vehicle Loan: (Lending Institution Name, Address, Phone No.) Description of Vehicle: _____				
Vehicle Loan: (Lending Institution Name, Address, Phone No.) Description of Vehicle: _____				
Other Financial Obligations: (Describe in Detail)				

ASSETS

Vehicle #1 (Make and Model): _____
Year: _____ Plate No. _____ State: _____ Expiration Date: _____ Present Value \$ _____

Vehicle #2 (Make and Model): _____
Year: _____ Plate No. _____ State: _____ Expiration Date: _____ Present Value \$ _____

Bank Accounts: (Name, Address and Phone No. of Institution)

Checking Account # _____ Balance \$ _____

Savings Account # _____ Balance \$ _____

Investment Accounts (Name of IRA, stocks, bonds, profit sharing, pension program)

_____ Estimated Value \$ _____

_____ Estimated Value \$ _____

_____ Estimated Value \$ _____

_____ Estimated Value \$ _____

Personal assets, such as real estate, boats, motorcycles, snowmobiles, jewelry, etc. (Describe)

_____ Estimated Value \$ _____

_____ Estimated Value \$ _____

_____ Estimated Value \$ _____

_____ Estimated Value \$ _____

REFERENCES:

Full name and address of nearest relative not living with you:

Name	Street Address, City, State, Zip	Relationship	Phone No
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I swear (affirm) under the penalty of perjury that the preceding information is true and correct. I understand that providing false and/or incomplete information to the Court may result in further legal action against me. The Court has my permission to make any necessary inquiries to verify the information provided and to obtain any additional information needed by the Court.

Dated: _____

Defendant's Signature

**Admonition Given by Collections Officer
When Defendant Requests Time to Pay**

You have asked the court to grant a stay on your fines and costs and completed an Affidavit and Defendant's Financial Statement so I can determine if you have a legitimate hardship in paying your fines and costs today.

I have reviewed your paperwork and in a moment we will discuss the possibility of a payment plan. At that time I will need to know the date on which you feel you can pay in full.

If your stay is granted you will be issued an Installment Payment Agreement or be given a date on which you must be paid in full. During this time it is your responsibility to notify the court of any changes in your address or telephone number. Failure to do so could be a violation of your probation or the Court's Order.

Failure to pay as agreed will result in either or all of the following:

1. A warrant being issued for your arrest.
2. A suspension of your driver's license.
3. Additional costs being assessed.
4. Delinquency report to nationwide credit bureau.
5. Execution by garnishment or liens.
6. A contempt of court hearing.

You are hereby on notice that collection of fines and costs, as Court ordered, is strictly enforced in this Court. I am here to help establish a workable payment plan for you. As long as you fulfill your obligations to this Court, the Court will work with you to insure that the fines and costs are paid according to your ability to pay.



PAYMENT SCHEDULE
 ISABELLA COUNTY TRIAL COURT
 300 NORTH MAIN STREET
 MT PLEASANT, MI 48858

989-772-0911 EXT 298

D
e
f
e
n
d
a
n
t

ESCAMILLA/VIVIANA/
 1434 GAYLORD ST #O-11
 MT PLEASANT, MI 48858

Defendant Date of Birth: 2/20/84
 Total Pay Plan Amount: 500.00
 Date of Agreement: 6/13/08
 First Payment Due: 6/30/08
 Amount: 55.00
 MONTHLY Payment Plan
 Payment Amount: 55.00



In the event that you fail to make the payments as agreed upon, a statutory late fee of 20% will be added to the remaining balance.

CASE ID	PAY#	DUE DATE	PAY AMT	BALANCE
08-866	1	Monday - June 30, 2008	55.00	445.00
	2	Wednesday - July 30, 2008	55.00	390.00
	3*	Tuesday - September 2, 2008	55.00	335.00
	4	Tuesday - September 30, 2008	55.00	280.00
	5	Thursday - October 30, 2008	55.00	225.00
	6*	Monday - December 1, 2008	55.00	170.00
	7	Tuesday - December 30, 2008	55.00	115.00
	8	Friday - January 30, 2009	55.00	60.00
	9*	Monday - March 2, 2009	55.00	5.00
	10	Monday - March 30, 2009	5.00	.00

* After PAY# denotes adjustment due to weekend or holiday.

THIS CASE ADDED TO PAYMENT PLAN (Date of Agreement)
6/13/08 KMS
MONTHLY \$55 due on 30 starting 6/30/08 KMS

NAME: ESCAMILLA/VIVIANA/ CASE NO: 08-866 PAGE 4

DATE	ACTIONS, JUDGMENTS, CASE NOTES	INITIALS
Total Payment Plan Amount: \$500.00		KMS
MISCELLANEOUS ACTION	ALL COUNTS	KMS
PARTIAL PAYMENT DUE	063008	KMS
***** END OF REGISTER OF ACTIONS ***** 06/13/08 16:13		

NXT ROA CASE 08-866 PTY D01 COUNT 00 INQ HERRON/MICHAEL ST
F1-Top F2-Bottom F9-Print F10-View F11-Scan F13-OutQ Page/Roll F3/F24-Prior

Court Crtrm Case No/CTN Type Name/Charge Aty/Off/Pros

FRIDAY, MARCH 07, 2008

<u>Court Crtrm</u>	<u>Case No/CTN</u>	<u>Type</u>	<u>Name/Charge</u>	<u>Aty/Off/Pros</u>
			AT :	
7600 PART PYT DUE	07-2415 370756016001	OD	D01 ST-PETER/WILLIAM/GREGORY III OWI (INTOX)	A:MARTIN O:REID/TREVOR P:ROMASHKO
7600 PART PYT DUE	07-2417 370700380101	SD	D01 CLARK/DANIEL/MORGAN OWI (INTOX)	O:LAKE/JOHN P:HICKMAN
7600 PART PYT DUE	07-2426 370700392701	SD	D01 MCWHORTER/BRENDALEE/JOSEPHIN OWVI	A:BROMELL O:WOODWARD/BRE P:SCULLY
7600 PART PYT DUE	07-2517 370700397301	SM	D01 VANBLARICUM/TIMOTHY/LOWELL DOMESTIC VIO	O:MERRILL/JEFF P:HICKMAN
7600 PART PYT DUE	07-2550 370700411501	SD	D01 MORRIS/ROBERT/ALAN OWI II-INTOX DWLS	A:CARPENTER O:GRIFFUS/AUTU P:SCULLY
7600 PART PYT DUE	07-2652 370700412601	FY	D01 MAZUREK/SHAUN/DONALD GUN IMP POSS NO INSURANCE	O:RICHARDS/JOS P:KOWALCZYK
7600 PART PYT DUE	07-2695 370700407601	SM	D01 SHERWOOD/KAREN/LEANN MALC USE TX	A:BROMELL O:STANDEN/TIM P:SCULLY
7600 PART PYT DUE	07-700 370700096701	ST	D01 DESJARDINS/LUCAS/SCOTT DWLS 2/+	O:CHRITZ/JOE P:HICKMAN
7600 PART PYT DUE	07D789239A	ST	D01 DENMAN/CHRISTI/MARIE OPER WO LIC	O:SIEGERT/CHRI
7600 PART PYT DUE	07D789239B	SI	D01 DENMAN/CHRISTI/MARIE NO PROOF INS	O:SIEGERT/CHRI
7600 PART PYT DUE	07D790439B	SI	D01 LEWIS/JASON/CHARLES REG/PLATE VL	O:PIETRANTONIO
7600 PART PYT DUE	07D790439C	SI	D01 LEWIS/JASON/CHARLES NO PROOF INS	O:PIETRANTONIO
7600 PAYMENT DUE	071401A	OI	D01 DAY/CONNIE/LYNN 16-20 SPEED	O:HOOKER/ROBER

Court Crtrm Case No/CTN Type Name/Charge Aty/Off/Pros

FRIDAY, MARCH 07, 2008

AT 9:00 a.m.

C2137 HRGB 2007-0000000669 FH D01 TINDALL, PRESTON, JEROME A:SHIRLEY
PART PYMT DU 370700105801 CONT SUB DEL/MAN MARIJUANA P:BURDICK
CS-MAINTAINING DRUG HOUSE
POLICE OFFCR-ASSAULT/R&O
DEF TX'D TO HAVE PYMT HERE BY 3/7/08

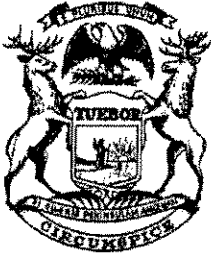
C2137 HRGB 2007-0000001505 FH D01 MAGNAN, MATTHEW, VERNON A:MOSES
PART PYMT DU 370700224201 CONT SUB DEL/MAN MARIJUANA P:BURDICK
CS-MAINTAINING DRUG HOUSE

C2137 HRGB 2007-0000001633 FH D01 SMITH, GEORGE, CHARLES A:MCLELLAN
PART PYMT DU 370700244501 WEAPONS-CARRY CONCEALED P:HICKMAN
WEAPONS CARRY W UNLAW INT
WEAPONS TASER POSS/SALE

C2137 HRGB 2007-0000001918 FH D01 GARZA, DAVID, ANTONIO A:BROMELL
PART PYMT DU 370700293401 POLICE OFF-FLEE 4TH DEG P:KOWALCZYK
POLICE OFFCR-ASSAULT/R&O A
OPERATING WHILE INTOXICAT

C2137 HRGB 2007-0000001925 FH D01 WARD, JOSEPH, KEVIN A:FISHER
PART PYMT DU 370700295101 CREDIT CARD POSSESSION A P:KRANZ
B&E VEH PROP LESS \$200
STOL PROP-R & C LESS \$200
ALCOHOL-P/C/P BY MINOR

C2137 HRGB 2007-0000002385 FH D01 MEYER, REBECCA, ANNE A:ALECK
PAYMENT DUE 370700381601 CNTRL SUB POSSESS <25 GRM P:KOWALCZYK
CNTR SUB PSS MARIJUANA



ISABELLA COUNTY TRIAL COURT
Collections Division
300 NORTH MAIN STREET
MT. PLEASANT, MI 48858
(989) 772-0911 EXT 298

***** OVERDUE PAYMENT NOTICE *****

6/12/08

103 LETTER

Dear

A WARRANT HAS BEEN ISSUED FOR YOUR ARREST. You have not complied with the terms of the Installment Payment Agreement entered into with this Court. To avoid the embarrassment and additional costs of being arrested, you must pay your balance immediately. Any delay in payment will also result in additional costs.

Overdue case(s) and amount due is listed below.

0739325 100.00

YOUR TOTAL BALANCE DUE IS:

\$100.00

Questions may be answered by calling extension 298

Delinquency Notices

76TH DISTRICT COURT
300 N. MAIN STREET
MT. PLEASANT

MI 48859

208 LATE PENALTY ASSESSMENT REPORT, PROBATION CASES - ALPHABETIC

CASE NO.	TYPE	COUNT	NAME	C/M/F	CHARGE	DISPO DATE	DISPO CODE	DISPO ACTION DATE	DESC	FINE & COSTS	RESTITUTION	PENALTY	BALANCE DUE
07-1844	SD	1	ADDOSSARI/NOBARK/	M	OWI (INTOX)	10/19/07	14	1/10/08	REVIEW	555.00	.00	111.00	666.00
07-1235	SN	1	KOHNE/RONDA/SUE	M	CHK NSF<\$100	09/12/07	14	1/10/08	REVIEW	440.56	70.56	74.00	514.56

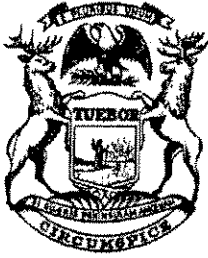
RUN DATE: 03/07/08

75TH DISTRICT COURT
300 N. MAIN STREET
MT. PLEASANT MI 48858

PAGE 1

20% LATE PENALTY ASSESSMENT REPORT, NON-PROBATION CASES - ALPHABETIC

CASE NO.	TYPE	COUNT	NAME	C/M/F	CHARGE	DISPO DATE	DISPO CODE	ACTION DATE	DESC	FINES & COSTS	RESTITUTION	PENALTY	BALANCE DUE
07442663	SI	1	MESI/JUSTIN/EMAD	C	1-5 OV SPEED	01/10/08	40	1/10/08	PAYMENT DUE	150.00	.00	30.00	180.00



ISABELLA COUNTY TRIAL COURT
Collections Division
300 NORTH MAIN STREET
MT. PLEASANT, MI 48858
(989) 772-0911 EXT 298

***** OVERDUE PAYMENT NOTICE *****

6/12/08

102 LETTER

Dear

A WARRANT HAS BEEN ISSUED FOR YOUR ARREST. You have not complied with the Order of this Court. You have not responded to attempts to contact you to resolve this matter. To avoid the embarrassment and additional costs of being arrested, you must pay your balance immediately. Any delay in payment will also result in additional costs.

Overdue case(s) and amount due is listed below.

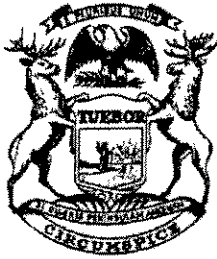
0795291B	204.00
----------	--------

YOUR TOTAL BALANCE DUE IS:

\$204.00

FAILURE TO PAY WILL ALSO AFFECT YOUR CREDIT REPORT.

Annual Warrant Letter



ISABELLA COUNTY TRIAL COURT
Collections Division
300 NORTH MAIN STREET
MT. PLEASANT, MI 48858
(989) 772-0911 EXT 298

***** OVERDUE PAYMENT NOTICE *****

1/10/08

ANNUAL WARRANT LETTER

Dear

A WARRANT WAS ISSUED BY THIS COURT AND YOU ARE SUBJECT TO ARREST AT ANY TIME. To avoid the embarrassment of being jailed you must pay any monies due this Court immediately. You must also comply with any terms Ordered by this Court. By complying with this Court's Order you will also avoid additional costs associated with being arrested. This Court is using a computer application to track your location and keep the authorities informed.

Overdue case(s) and amount due is listed below.

07-735 414.00

YOUR TOTAL BALANCE DUE IS:

\$414.00

ANNUAL POST WARRANT REMINDER LETTERS
FOR 2006 ISSUED BENCH WARRANTS
DISTRICT DIVISION

278 Letters mailed between 01/30/07 and 02/08/07
\$152,179.63 in Assessments not Paid

Results	Total Collected	Paid Voluntarily	Paid with Bond	Payment Plans	Jail in Lieu	Community Service in Lieu
05/04/07	\$17,360.00	\$13,690.92	\$3,939.08	10	\$240.00	\$494.00
01/07/08	\$48,733.46	\$30,868.35	\$17,865.11	13	\$1,139.00	\$4,877.83

Community Service

