

<b>STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY</b>	<b>ORDER TO REMIT PRISONER FUNDS FOR FINES, COSTS, AND ASSESSMENTS</b>	<b>CASE NO. and JUDGE</b>
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Court address

Court telephone no.

THE PEOPLE OF  <input type="checkbox"/> The State of Michigan  <input type="checkbox"/> _____
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v

Prisoner's name		
Prisoner no.	SID	DOB
Institution name and address		

**THE COURT FINDS:**

1. The prisoner owes a balance of \$ \_\_\_\_\_, **not including restitution**, which is collected by the Department of Corrections in accordance with MCL 791.220h, for the obligation ordered in the judgment of sentence or other order dated \_\_\_\_\_. (A copy of the judgment of sentence or order is attached.)

**IT IS ORDERED:**

2. For payment toward the obligation, the Department of Corrections shall collect 50 percent of all funds received by the prisoner over \$50.00 each month.
3. If the amount withheld at any one time is \$100.00 or less, the Department of Corrections shall continue collecting funds from the prisoner's trust account until the sum of the amounts collected exceeds \$100.00, at which time the Department of Corrections shall remit that amount to this court to  the above address.  the following address:
4. Withdrawal from the prisoner's trust account and remittance to this court shall continue until the obligation is paid in full. If the prisoner transfers to a facility at which a prisoner's trust account is not maintained, or if the prisoner is paroled, discharged, or dies, any withheld funds shall be remitted to this court.

  
 \_\_\_\_\_  
 Judge signature and date

