Approved, SCAO

## STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT

## MOTION AND AFFIDAVIT FOR INSTALLMENT PAYMENTS/TO AMEND ORDER FOR INSTALLMENT PAYMENTS

CASE NO.

Court address Court telephone no. Plaintiff's name (judgment creditor), address, and telephone no. Defendant's name (judgment debtor), address, and telephone no. Plaintiff's attorney, bar no., address, and telephone no. See instructions on reverse side Date of judgment: Amount of judgment (including costs): \$ \_\_\_\_\_ Approximate balance due on judgment: \$ \_\_\_\_\_ 1. A judgment was entered against me in this case as stated above. I submit the following information: 2. My average income is about \$ \_\_\_\_\_ every week. two weeks. month. I am employed and the name and address of my employer is \_\_\_\_\_ ☐ I am not employed. ☐ I am receiving unemployment benefits. ☐ I have a vehicle: Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Amount Owed: \$\_\_\_\_\_ The total amount in all my bank accounts is \$\_\_\_\_\_. Write down any other assets and how much they are worth. If you need more space, attach a separate sheet. I pay \$\_\_\_\_\_\_ in rent/mortgage every month. I pay \$\_\_\_\_\_ in utilities (water, electricity, gas) every month. I pay \$\_\_\_\_\_ for court-ordered child support. I pay \$\_\_\_\_\_ for court-ordered \_\_\_\_\_\_. Write down any other obligations and how much you pay. If you need more space, attach a separate sheet. 3. \( \square\) as **I ask** this court for an order allowing installment payments of the judgment in the amount of \$ \( \square\) every week two weeks month starting , and that no garnishment for wages/personal work and labor issue on this judgment as long as payment is made. OR ☐ b. I have an order for installment payments, but my circumstances have changed and I ask this court for an amended order in the amount of \$\_\_\_\_\_\_ every \quad \text{week} \quad \text{two weeks} \quad \text{month} starting \quad \text{until paid in full or until further order of the court.}  $\square$  4. A writ of garnishment for periodic payments was issued on  $\_$ \_\_\_ . I ask that it be suspended. 5. This affidavit is made on my personal knowledge and, if sworn as a witness, I can testify competently to the facts in this motion and affidavit. Defendant's signature \_\_\_\_\_ , \_\_\_\_ County, Michigan. Subscribed and sworn to me on Date Signature: Notary public/Deputy court clerk My commission expires: Date Notary public, State of Michigan, County of \_\_\_\_ CERTIFICATE OF MAILING I certify that on this date I served a copy of this motion on the parties or their attorneys by first-class mail to their last-known addresses as defined in MCR 2.107(C)(3). Defendant's signature/District court clerk Date

NOTICE TO PLAINTIFF: If you do not file objections to the motion with the court and serve them on the defendant within 14 days from the mailing of this motion, the motion will be granted without further hearing. If you file timely objections, the court will decide the motion based on the papers filed or will notify the parties that a hearing will be required.

MCL 600.6201 et seq., MCR 2.119(B)(1)(c), MCR 3.101(N), MCR 3.104