## STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY

## ORDER TO INTERCEPT STATE INCOME TAX (Part 1)

CASE NO.
 PETITION NO.
 JUDGE

COUNTY	(Part 1)		PETITION NO.
			JUDGE
Court address	,	• Zip code	Court telephone no
In the matter of	s(es)		
THE COURT FINDS:	(3)		
1. On this	s court entered an order	directing	
Date		-	
First, middle initial, and last name	Social security no.	• First, middle initial, and	last name • Social security no.
Address		Address	
City, state, zip		City, state, zip	
to reimburse the court for costs of	care and/or services ass	essed in the above m	atter. The balance owing as of
Date	is \$	The account is de	elinquent \$
The above person(s) has/have fail	ed to comply with the ord	der of reimbursement a	and is/are delinquent.
3. A notice of intent to intercept state	income tax was sent to	Name(s)	on
		( )	
Date ·			
• 4. IT IS ORDERED the Michigan De	epartment of Treasury sh	all withhold up to \$	of any state income
tax refund due the above person	(s) and shall forward the	withholdings to:	
•			
County/Court name		<u> </u>	
•			
Department/Address			
Address		<u> </u>	
Address			
City, state	Zip • Telephone	no.	
	J	udge signature and date	
	CERTIFICATE		
I served a copy of this order on the p	erson(s) named above by	y first-class mail addre	essed to their last-known addresses as
			cate of mailing has been examined by
me and that its contents are true to the	ne best of my information	, knowledge, and beli	ef.
Date	S	ignature	
Approved SCAO		Diotributa farra ta	
Approved, SCAO Form JC 61, Rev. 9/20		Distribute form to: Court (Part 2)	

## STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY

## ORDER TO INTERCEPT STATE INCOME TAX (Part 2)

CASE NO.PETITION NO.JUDGE

			JUDUL		
Court address		• Zip code		Court telephone no.	
In the matter of					
THE COURT FINDS:	is(es)				
THE COURT FINDS:					
1. On th	is court entered an order o	directing			
Date	為和哲學系統			<b>第一年中人</b> 第一	
•	交通法律直交通	•		<b>这個無關於</b>	
First, middle initial, and last name	<ul> <li>Social security no.</li> </ul>	First, middle initial, and las	t name	Social security no.	
Address		Address			
City, state, zip		City, state, zip			
to reimburse the court for costs of	f care and/or services asse	essed in the above matte	er. The baland	ce owing as of	
				•	
Date	is \$	The account is delin	iquent \$	·	
2. The above person(s) has/have fa	iled to comply with the ord	er of reimbursement and	d is/are deling	uent.	
3. A notice of intent to intercept state	e income tax was sent to _ N	lame(s)		on	
Date					
• 4. IT IS ORDERED the Michigan D				_ of any state income	
tax refund due the above persor	n(s) and shall forward the v	withholdings to:			
•					
County/Court name					
• Department/Address		_			
•					
Address					
City, state	● Zip ■ Telephone n	0.			
		_			
	Ju	idge signature and date			
	CERTIFICATE (	OF MAILING			
I served a copy of this order on the p					
defined by MCR 2.107(C)(3). I declar me and that its contents are true to the			te of mailing h	as been examined by	
The and that he contents are true to t	are best of my imormation,	Miowicago, and bollor.			
Date	Si	gnature			
Approved, SCAO		Distribute form to:			
Form JC 61, Rev. 9/20		Court (Part 2)			
MCL 712A.18(2), MCL 769.1(7) Page 1 of 1		Debtor (Part 1) Department of Treasury (Part 1)			