STATE OF MICHIGAN JUDICIAL CIRCUIT

EMPLOYMENT STATUS DISCLOSURE

CASENO.

| COUNTY | | | | | | |
|---|---|--|------------------------|---------------------|---------------------|--|
| Friend of the court address | | | Fax | number | Telephone no. | |
| The information obtained will be treated as cenforcing, and complying with state and federal | | | • | for the purposes | of administering, | |
| Contact person | Title | | Telephone no. | Date | | |
| Employer name and address | | Name of individual | | | | |
| ATTENTION: | | Social securi | Social security number | | | |
| Our records indicate that you are the last-known Our office may have previously issued an inconste that MCL 552.611 through MCL 552.67 Please contact the friend of the court by | ome withholding no 14 require you to h | tice for this indiv onor the notice | ridual to your compa | any. If you receive | ed a notice, please | |
| facsimile at the above address or Fax no | umber. Thank yo | ou for your co | | | | |
| \Box The individual is currently employed here | and has been sind | Date | | · | | |
| If the individual is not employed with yo | ou, please check | the items bel | ow that apply. | | | |
| $\label{eq:the_individual} \Box \text{The individual was never employed here}.$ | | | | | | |
| ☐The individual ☐quit ☐was fired | d □wastermii | nated \square w | as laid off on | Date | | |
| ☐ The individual is receiving unemployment | from: Name | | | Dute | | |
| | Address | | | | | |
| ☐ The individual is receiving benefits from: ☐ Workers' compensation ☐ Disability | City, state, z | zip | | | Telephone no. | |
| | Name Address | | | | | |
| ☐ The individual may now be working at: | City, state, z | zip | | (| Telephone no. | |
| | Name | | | | | |
| | Address | | | (|) | |
| ☐ The last-known address of the individual is: | City, state, z | zip | | | Telephone no. | |
| | City, state, 2 | zip | | (| Telephone no. | |
| Date Name of person p | reparing form (type or | print) | Signature of person | on preparing form | | |
| FOC 22h (2/00) EMPLOYMENT STATUS DU | SCI OSUBE | | () Telephone no. | | | |