

| | | | |
|--|--|--------------------------------------|-----------------|
| STATE OF MICHIGAN 53rd CHEBOYGAN | JUDICIAL CIRCUIT COUNTY | PRISONER INFORMATION ADDENDUM | CASE NO. |
|--|--|--------------------------------------|-----------------|

| | | |
|------------------|----------|------------------|
| Plaintiff's name | v | Defendant's name |
|------------------|----------|------------------|

Attorney: _____

Attorney: _____

GENERAL INFORMATION

| | | |
|-------------------------|---------------|-----------------|
| Full name (last, first) | Date of birth | Offender number |
|-------------------------|---------------|-----------------|

| | | | |
|---------|------|-------|-----|
| Address | City | State | Zip |
|---------|------|-------|-----|

| | | |
|-------------------------------|-----------------------|--|
| Date current sentence started | Earliest release date | Contacted the friend of the court to modify child support during this period of my incarceration. <input type="checkbox"/> Yes Date of contact: _____ <input type="checkbox"/> No |
|-------------------------------|-----------------------|--|

Dependent children in this case (name[s] and date[s] of birth)

1. _____
2. _____
3. _____
4. _____

Number of dependent children not in this case: _____

INCOME/ASSET, WORK, AND EXPENSE INFORMATION

| | |
|--|--|
| Employed by | Name of employer |
| <input type="checkbox"/> Prison at \$ _____ week | <input type="checkbox"/> _____ at \$ _____ hour for _____ hours per pay period |

Other income sources:

| | | | |
|-------------------------|------------------------|--|--------------------|
| \$ _____ profit sharing | \$ _____ interest | \$ _____ dividends | \$ _____ royalties |
| \$ _____ annuities | \$ _____ pension | \$ _____ deferred compensation | \$ _____ |
| \$ _____ trust fund | \$ _____ rental income | \$ _____ Individual Retirement Account | \$ _____ |

| | |
|---|------------------------------------|
| Bank accounts | Land (estimated value of all land) |
| \$ _____ checking \$ _____ savings \$ _____ | \$ _____ |

Vehicles (estimated value and type of vehicle)
 \$ _____ \$ _____ \$ _____

Name and address of last employer

| | |
|---|-----------------------------------|
| Dates employed by above employer from: _____ to: _____ | Reason for leaving above employer |
|---|-----------------------------------|

| | |
|--|--|
| Earnings paid by above employer each pay period before taxes \$ _____ every _____ | Medical conditions that affect ability to work (specify) |
|--|--|

Educational level
 Less than high school High school graduate/GED Trade school Associate degree Bachelor degree Graduate degree

| | | | | |
|---|-------------|-------|--------|-------|
| Spousal support orders from other cases | Case number | City | County | State |
| \$ _____ every _____ | _____ | _____ | _____ | _____ |
| \$ _____ every _____ | _____ | _____ | _____ | _____ |

| | | | |
|------------------------------|---|--|-------------------------------|
| Rent \$ _____ every _____ | Vehicle payment \$ _____ every _____ | Mortgage payment \$ _____ every _____ | Other \$ _____ every _____ |
|------------------------------|---|--|-------------------------------|

INFORMATION AS TO CHILD'S CUSTODIAN (if known)

| | |
|--------------------------------------|----------------------------|
| Full name of custodian (last, first) | Date of birth of custodian |
|--------------------------------------|----------------------------|

| | |
|---------------------------------|--|
| Last known address of custodian | Last known telephone number of custodian |
|---------------------------------|--|

Are you currently incarcerated for a crime against the child(ren) in this case, their parent, and/or their custodian? Yes No

I declare that the statements above are true to the best of my information, knowledge, and belief.

Date

Signature