

Affidavit of Judgment Debtor

(Form DC 87)

STATE OF MICHIGAN JUDICIAL DISTRICT	AFFIDAVIT OF JUDGMENT DEBTOR	CASE NO.
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Court address _____ **Court telephone no.** _____

Plaintiff's name and address

v

Defendant's name and address

I swear that

1. I am a party in this case.
2. A judgment was entered against me in the amount of \$_____.
3. The following is a true statement of my assets and financial obligations.

IDENTIFICATION	Address		City, state, zip	
Telephone no.	Birth date	Social Security no.	Driver license no.	
Employer			Employer telephone no.	
Address		City, state, zip		
INCOME	Net earnings \$	<input type="checkbox"/> Weekly	<input type="checkbox"/> Bi-weekly	<input type="checkbox"/> Monthly
				Payday
ASSETS	Checking \$	Account no.	Savings \$	Account no.
Name of bank or financial institution			Branch location	
Automobile	Year	Make	License plate no.	Approximate value \$
Amount owed \$	Leinholder		Registered to:	
Home	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	Address	
		City, state, zip		
Monthly payment \$	Value \$	Owed \$	Name of mortgage holder or landlord	
Total money owed to you \$	Specify below each amount of money owed to you, the due date, and the name of the individual, business, etc. who owes you money			
Amount \$	Due date	Name who owes money		
Amount \$	Due date	Name who owes money		

(List additional assets on reverse side)

I swear under penalties of perjury that this information is true, accurate, and complete.

Date

Signature

Subscribed and sworn to before me on _____, _____ County, _____ Michigan.
Date

My commission expires: _____ Signature: _____
Deputy court clerk/Notary public

Approved, SCAO

Original - Court
1st copy - Plaintiff
2nd copy - Defendant

**STATE OF MICHIGAN
JUDICIAL DISTRICT**

AFFIDAVIT OF JUDGMENT DEBTOR

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Defendant's name and address

Other Assets: (continued)