

## STATE OF MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

NICK LYON DIRECTOR

DATE: 04/05/2017

JANE JEAN DOE 200 CLEARMONT DETROIT MI 48888

## **Notice of Unclaimed Property (Money)**

Our records indicate that the following support check(s) issued to you have not been cashed:

Check Number	<u>Issue Date</u>	<u>County</u>	Related to Following Court Case Number(s)		
0024952378	January 10, 2016	Wayne	1996652635 DS		
0024997106	February 13, 2016	Wayne	1996652635 DS		

checks, you must provide all of the	e followin	ig identifying information.						
Name (Please Print Last, First, N	1iddle)							
Current / New Mailing Address:		City		State	Zip Code			
Country (if not US)	Social Security Number		Date of Birth					
By signing this document I acknowledge the information is accurate and truthful.								
Signature					Date			
So that we can contact you if we h	nave any	questions, please provide	e your pho	one numb	er(s):			

Please note that the listed checks can no longer be cashed. So that we can reissue any of the above

If you wish to receive any of the unclaimed property (money) you must return this page with your signature and the requested information **within 30 days** of the receipt of this notice, to the following return address:

Other Phone

Work Phone

Michigan Office of Child Support ATTN: MiSDU P.O. Box 30354 Lansing MI 48909-7854

Home Phone

If you have any questions about this notice, call the Friend of the Court (FOC) Interactive Voice Response (IVR) system at (877) 543-2660. Please follow the prompts to a customer service representative who can answer your questions regarding the Unclaimed Property (Money) Notice.

Thank you for your cooperation,

The Michigan Office of Child Support

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The Michigan Department of Health and Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your county.