CID-014 (11/2018) Michigan State Police

UTHORITY: MCL 333.7523
COMPLIANCE: Required
PENALTY: Peturn of property to owner

Incident No.	
Date Seized	Claim Deadline

NC	TI	CF	\cap E	\sim 1	ΛΙ	N/
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Seizing Law Enforcement Agency						Phone Nu	umber		
Location to Fil	le Claim	Addres	SS						
Address Whe	re Seized: Number and Street	City			State			Zip Code	
Property Number		n of Property - Describe Fully rial No Denomination/Amount of Money)						Value of Property	
Number	(manufacturer/make/oci	ilai ivo	Denominat	ion/Amou		эпсу)			
Name of Clair	mant			Work Phon				Di	
Name of Clair	папі			WOIK PHOH	е		Home F	rnone	
Address: Nun	nber and Street		City			State		Zip Code	
Signature of (Claimant		<u>I</u>			Date Signe	ed		
Claimant's Int	terest in the Property								
RECEIPT (DE CLAIM								
	of Person Receiving Claim	Work	Unit						
Signature of F	Person Receiving Claim			Da	te Receiv	red		Time	
<u> </u>	Č								

DISTRIBUTION: Original - Master File Machine Copy - Claimant Machine Copy - Financial Services

*THIS INFORMATION IS CONFIDENTIAL DISCLOSURE OF CONFIDENTIAL INFORMATION IS PROTECTED BY THE FEDERAL PRIVACY ACT.