

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MICHIGAN

CLOSED CASE REQUEST FORM

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Case Name: _____ Case Number: _____

Requestor Information

Name: _____

Address: _____

Phone number: _____

Payment Method

Credit Card (please attach Credit Card Authorization form)

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**Please make checks/money orders payable to "Clerk, US Bankruptcy Court" in the amount of \$64.00

Mail form and method of payment to: US Bankruptcy Court, One Division Avenue, North, Room 200, Grand Rapids, MI 49503

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