



GRAND TRAVERSE COUNTY SHERIFF'S OFFICE

CORRECTIONS DIVISION

320 Washington Street • Traverse City, MI 49684

BOOKING FEE REFUND FORM

Pursuant to Public Act 124, Section 4B (1) beginning Aug 1, 2003, each person who is incarcerated in the Grand Traverse County Correctional Facility shall pay a fee of \$12.00 to the county Sheriff when the person is admitted into the jail. Failure to pay this fee would subject you to a \$100 civil fine.

If you have been charged all or a portion of this fee for criminal charge(s) against you AND either the prosecution against you was terminated or you were found not guilty of ALL charges, you may request a refund by completing the form below and returning it to the address listed above.

Claim for Reimbursement of Booking Fee
(Type or print all information)

Claimant Full Name: _____ Date of Birth: _____

Current Address: _____
(Street)

_____ (City) _____ (State) _____ (Zip Code)

Court in which prosecution was terminated or claimant found Not Guilty: _____

Date of termination or claimant found Not Guilty: _____

Amount claimed: \$ _____

I certify that the above information is correct.

(Claimant Signature)

(Date)

****MUST BE ATTACHED:**

1. Copy of payment receipt showing booking fee
2. Copy of court disposition showing termination or Not Guilty verdict