

Macomb County Clerk Carmella Sabaugh's
Circuit Court Fax Filing Cover Sheet

E-mail to: faxfiling@macombgov.org or Fax to: 586-408-6027

PLEASE NOTE:

- Pleadings are deemed filed the day they are received as long as the first page is received on or before 4:30 p.m. on regular county business days. If the first page is received after 4:30 p.m., the pleadings will be deemed filed on the next regular county business day.
- Pursuant to MCR 2.406, the faxed document is considered an original document: **DO NOT send your faxed documents through the mail. Doing so will cause delays.**
- Fax filing service is for filing of pleadings with the clerk's office only - we cannot deliver non-pleadings to other departments.
- ALL FILERS WILL BE CHARGED A FAX FILING FEE (up to 30 pages = \$10.00, 31 – 50 pages = \$15.00 – **maximum 50 pages allowed**)

REQUESTOR'S INFORMATION

PRINT LEGIBLY

Name: _____ E-mail address: _____

Mailing Address: _____ City, State, Zip: _____

Daytime phone number: _____ Fax number: _____

CASE INFORMATION

Case Number: _____ - _____ - _____ or ☐ New Case: How many sealed copies of the summons would you like mailed back to you? _____
To get case number, go to: macombgov.org/pa

Parties Involved: Plaintiff: _____ v Defendant: _____

Including cover sheet, how many pages are being faxed _____

COPIES

Yes No

☐ ☐

Would you like date-stamped copy of first page of each pleading mailed back to you? (You are responsible for making copies of subsequent pages since they are already in your possession)

☐ ☐

If you are filing a motion would you like a copy forwarded to the Judge?

☐ ☐

If your case involves minor children, would you like a copy forwarded to Friend of the Court?

FEES

(check all that apply)

- ☐ Civil or Domestic Case Filing Fee.....\$150
☐ Jury Demand Fee\$85
☐ Motion Fee.....\$20
☐ Writ of Garnishment/Execution/Judgment
Debtor's Exam Subpoena.....\$15
☐ Appeals to Circuit Court.....\$150
☐ Appeal from Circuit Court.....\$25
☐ Reinstatement Fee.....\$15
☐ Drivers License Restoration Fee.....\$45
☐ Judgment and Order Entry Fee – Support.....\$40
☐ Judgment and Order Entry Fee –
Custody and/or parenting time.....\$80

PAYMENT INFORMATION

COSTS (from above): \$ _____

Fax filing fee: \$ _____

50 page limit Up to 30 pages: \$10.00
31 – 50 pages: \$15.00

TOTAL COST: \$ _____

I authorize the Macomb County Clerk's Office to charge me the amount indicated above for the items I have selected and the fax filing fee. (If additional funds are required, you will be contacted before being charged.)

Credit Card Type:



Credit Card Number: _____

Expiration Date: ____ - ____

Cardholder name (PRINT) _____

Cardholder signature (REQUIRED) _____