

Annual Local Unit of Governmental Asset Forfeiture Report

Fiscal Year _____, 200_ through _____, 200_
(Designate your fiscal year)

Agency/Entity Reporting	Street Address		
City, State & Zip Code	County	Telephone Number () -	
Director, Chief, Sheriff or Prosecutor	Title	Date	
Contact Person Name	Telephone Number () -	Email address	

If there are no forfeitures to report for the above fiscal year please check here and return form.

A.	Number of forfeiture proceedings:			
	1. <i>Instituted</i> in Circuit Court:			
	2. <i>Concluded</i> in Circuit Court:			
	3. <i>Pending</i> in Circuit Court:			
	4. Administratively granted (Circuit Court not involved):			
B.	Inventory of Forfeited Real Property awarded to the Reporting Agency:			
	1. Single Family Residential:	# of Units:	Dollar Amount:	\$
	2. Multiple Family Residential:	# of Units:	Dollar Amount:	\$
	3. Industrial units:	# of Units:	Dollar Amount:	\$
	4. Commercial units:	# of Units:	Dollar Amount:	\$
	5. Agricultural and Land Units:	# of Units:	Dollar Amount:	\$
	6. SUBTOTAL for Real Property:		Dollar Amount Subtotal:	\$

C.	Inventory of Forfeited Conveyances awarded to the Reporting Agency (Use Attachment A):		
	1. Motor Vehicles:	# of Motor Vehicles:	Dollar Amount: \$
	2. Vessels:	# of Vessels:	Dollar Amount: \$
	3. Aircraft:	# of Aircraft:	Dollar Amount: \$
	4. <i>SUBTOTAL for Conveyances:</i>		Dollar Amount Subtotal: \$
D.	Total dollar amount of Cash, Negotiable Instruments, and Securities awarded to the Reporting Agency:		
			Dollar Amount: \$
E.	Forfeited Other Personal Property (not listed above) awarded to the Reporting Agency:		
			Dollar Amount: \$
F.	Indicate the net proceeds your agency received from shared forfeitures (Use Attachment B)		
	1. Federal forfeitures shared:		\$
	2. State/ Local Joint Investigations:		\$
	3. <i>SUBTOTAL for Shared forfeitures received:</i>		Dollar Amount Subtotal: \$
G.	Deductions from gross proceeds:		
	1. Administrative costs incurred to close the forfeiture		Dollar Amount: \$
	2. Amount of proceeds shared with (given to) other agencies: (Use Attachment B)		Dollar Amount: \$
	3. <i>SUBTOTAL for Deductions:</i>		Dollar Amount Subtotal: \$
H.	NET TOTAL PROCEEDS of all property forfeited (B6 + C4 + D + E + F3 - G3)		Dollar Amount: \$

I.	Report how forfeiture funds were used by your agency to enhance controlled substance law enforcement efforts in accordance with M.C.L. 333.7524. Only report expenditures during this reporting period. Report in percentages only, total expenditures must equal 100%			
	1. Personnel:	%	4. Buy Money:	%
	2. Equipment:	%	5. Federal Grant Match:	%
	3. Informant Fees:	%	6. Other (Please describe below):	%
	Describe:			
J.	Donated Grow Lights and Scales (Use Attachment C):			
	1. Lights for Plant Growth:	# of Lights:	Value of all Lights:	\$
	2. Scales:	# of Scales:	Value of all Scales:	\$

Certification of Submission	
I confirm that the information I have provided is true to the best of my knowledge and I am an authorized agent to submit this report.	Date:
NAME/TITLE (please print/type): _____	

Please return form via mail, fax or email to:

**Law Enforcement Section
Office of Drug Control Policy
5th Fl., Lewis Cass Building
320 S. Walnut Street
Lansing, MI 48913**

FAX: (517) 373-2963

Email: rappj@michigan.gov and leduker@michigan.gov

Should you have questions or need assistance, please contact Jim Rapp at (517) 241-2916 or Nancy Becker Bennett at (517) 373-2952. You can also email them at rappj@michigan.gov or beckern@michigan.gov.

