



PAYMENT OPTIONS

CASE NO.

County Clerk's Address
212 East Paw Paw Street – Suite 101, Paw Paw, MI 49079
Email: clerk@vbco.org

County Clerk's Telephone No.
(269) 657-8218
Fax: (269) 657-8298

You have been released from jail or recently left court after being sentenced. Within **48 business hours** of your release from jail or inpatient programming, you are to pay your court fees or make payment arrangements for your court fees. To do so, you have the following options:

1. **To make a payment** (always include your case number):
 - a. Online at www.GovPayNow.com - use payment location code: 5246. For more information about GovPayNow go to our website: <https://www.vbco.org/courtpayments.asp>
 - b. Pay by mail to the County Clerk's office: 212 E. Paw Paw Street, Suite 101, Paw Paw, MI 49079.
 - c. Pay in person at the County Clerk's office, call (269) 657-8218 to make an appointment.

2. **To make payment arrangements**, complete the Payment Plan Application below and return it to the County Clerk:
 - a. By email at: clerk@vbco.org
 - b. By fax at: (269) 657-8298
 - c. In person at 212 E. Paw Paw Street, Suite 101, Paw Paw, MI 49079, call (269) 657-8218 to make an appointment.

Payment Plan Application (Complete the section below only if you are not able to pay in full)

Defendant's First Name		Last Name		Date of Birth	
Address			City	State	Zip
Driver's License No.	State	Phone No.	<input type="checkbox"/> Cell <input type="checkbox"/> Home	Email Address	
Employer's Name				Employer's Phone No.	
Employer's Address			City	State	Zip
Wages before tax: \$		Check the appropriate box for how often you receive your paychecks <input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Monthly			

Contact Person (not living with you). You must list a person we can contact if you cannot be reached.

Contact Person's Name		Contact Phone No.		<input type="checkbox"/> Cell	<input type="checkbox"/> Home
Contact's Address			City	State	Zip
Relationship to this contact person				Contact's Email Address	

Payment arrangement amount I am able to pay per month: \$ _____
All Payments are due on the 15th of each month

Set a reasonable payment amount that you will be able to pay monthly. If you do not choose a reasonable amount, an amount will be chosen for you. If you find at any point that you are unable to comply with the payment plan, contact the County Clerk's office. If you do not, and you fall behind or fail to make the payments, you will be required to appear in court to show cause why you are not paying as ordered.

I swear or affirm that the above information is true and complete and that I understand I may be held in Contempt of Court for providing false and/or incomplete information. I agree to pay the outstanding amount according to the Payment Plan Agreement that will be mailed and/or emailed to me upon entry with the court. I also understand that failure to comply with the payment plan may result in a Show Cause Hearing and/or Bench Warrant being issued without further notice.

_____ Date

_____ Defendant's Signature