

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

United States of America,

Plaintiff,

Case No. 23-cr-20298

Honorable Judith E. Levy

vs.

Wendy Beard,

Defendant.

[SAMPLE] ANCILLARY PETITION¹

SECTION I – CONTACT INFORMATION

PETITIONER INFORMATION	
Petitioner/Contact Name: (Last, First)	
Business/Institution Name: (if applicable)	Prisoner ID: (if applicable)
Address: (Include Street, City, State, and Zip Code)	
Phone: (optional)	Email: (optional)
ATTORNEY INFORMATION (if applicable)	
Are you an attorney filing this petition on behalf of your client? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Attorney Name: (Last, First)	
Attorney Title:	
Firm Name: (if applicable)	

¹ **Note:** This sample is not intended to provide legal advice. There is no legal form or format required for filing an ancillary petition; this document is provided as an example for your convenience. You do not need to use this document to provide the necessary information.

Attorney Address: (Include Street, City, State, and Zip Code)	
Attorney Phone: (optional)	Attorney Email: (optional)

If any of this information changes, you are responsible for notifying the Court of the new information.

SECTION II – ASSET LIST

List each asset for which you are petitioning by Lightroom ID# and Title/Description² (attach additional sheets if necessary).

Lightroom ID #	Asset Title/Description

² From Exhibit 1 of the Stipulated Preliminary Order of Forfeiture.

SECTION III – INTEREST IN PROPERTY

Identify your interest in each of the assets for which you are filing an ancillary petition. If you are filing for multiple assets and the responses are not the same for each asset, please print out multiple copies of this page to submit with the petition. If you have documentation that supports your interest in the petitioned assets (e.g., consignment agreement, bill of sale, retail installment agreements, contracts, titles, or mortgages), please include copies of the documents with the submission of the petition.

INTEREST IN PROPERTY INFORMATION	
Lightroom ID #	Asset Title/Description

In the space below, please explain the nature and extent of your right, title, and interest for each of the assets for which you are filing this petition. In other words, tell us why you are filing a petition for this property. This explanation should include information to identify the time and circumstances of your acquisition of any right, title, or interest in the identified asset(s).

In the space below, please list any documents that you are including in support of your interest in the asset(s). If none are included, please explain why.

SECTION IV – RECOVERY OF LOSS

Complete this section for assets you have recovered all or a portion of your losses either via an insurance claim and/or via some other source of recovery. If you have more recovery of loss information than will fit on this page, print out multiple copies of this page to attach with the petition and indicate which assets apply to each page. If you have not received any recovery for your losses, then leave this section blank.

RECOVERY OF LOSS INFORMATION	
Lightroom ID #	Asset Title/Description

INSURANCE CLAIM INFORMATION (if applicable)	
Name of Insured: (Last, First)	
Policy Number:	Claim Number:
Name of Insurance Company:	Name of Insurance Agent: (Last, First)
Insurance Company Address: (Include Street, City, State, and Zip Code)	
Phone: (optional)	Email: (optional)
Have you received compensation from the insurance company? <input type="checkbox"/> YES <input type="checkbox"/> NO	Amount of Compensation:

If other sources of recovery exist (e.g., partial returns or other settlements), please list and describe the details below.

OTHER SOURCE(S) OF RECOVERY (if applicable)	
Source of Recovery 1:	Amount of Recovery:
Source of Recovery 2:	Amount of Recovery:

In the space below, please list any documents you are including in support of your claim of recovery of loss. If none are included, please explain why.

SECTION V – DECLARATION

The following declaration should be completed by the petitioner. If the petitioner is represented by an attorney, the attorney may complete the declaration as long as the petitioner completes the sworn notice of representation.

I attest and declare under penalty of perjury that my petition is not frivolous and the information provided in support of my petition is true and correct to the best of my knowledge and belief.

Signature

Printed Name

Date

Sworn Notice of Representation

This section must be completed only by petitioners who are represented by an attorney and whose attorney has executed the declaration provided above.

I have retained the above-named attorney who has authority to represent me in this matter. I have fully reviewed the foregoing petition and found that its contents are truthful and accurate in every respect. I declare under penalty of perjury that the foregoing information is true and correct.

Signature

Printed Name

Date

A copy of the Petition and all supporting documents should be sent to:

United States District Court
Clerk of the Court
Eastern District of Michigan
231 W. Lafayette
Detroit, Michigan 48226

A copy of the Petition must also be served on the United States Attorney at the following e-mail address: USAMIE.USvBeard@usdoj.gov or at the following mailing address:

United States Attorney
ATTN: (Adriana Dydell)
Assistant U.S. Attorney
211 W. Fort Street, Suite 2001
Detroit, Michigan 48226-3211

A false statement or claim may subject a person to criminal prosecution under Title 18 United States Code, Sections 1001 and 1621.