

IN THE MAGISTRATE COURT OF TERRELL COUNTY, GEORGIA

PLAINTIFF'S CONTACT INFORMATION:

NAME

STREET ADDRESS

CITY STATE ZIP CODE

PHONE NUMBER / E-MAIL

DEFENDANT'S CONTACT INFORMATION:

NAME

STREET ADDRESS

CITY STATE ZIP CODE

GARNISHEE'S CONTACT INFORMATION:

NAME

STREET ADDRESS

CITY STATE ZIP CODE

GARNISHMENT CASE NO. _____

ATTORNEY FOR PLAINTIFF:

NAME

STREET ADDRESS/ PO BOX

CITY STATE ZIP CODE

PHONE NUMBER

BAR NUMBER

NOTICE TO DEFENDANT OF RIGHTS AGAINST GARNISHMENT OF MONEY, INCLUDING WAGES AND OTHER PROPERTY

You received this notice because money, including wages, and other property belonging to you have been garnished to pay a court ordered judgment against you. **HOWEVER, YOU MAY BE ABLE TO KEEP YOUR MONEY, INCLUDING WAGES OR OTHER PROPERTY. READ THIS NOTICE CAREFULLY.**

State and federal law protects some money, including wages, from garnishment even if it is in a bank. Some common exemptions are benefits from social security, supplemental security income, unemployment compensation, worker's compensation benefits, Veteran Administration benefits, state pension benefits, retirement funds, and disability income. This list of exemptions does not include all possible exemptions. A more detailed list of exemptions is available on the website for the Attorney General at www.law.ga.gov/garnishment-exemptions .

Garnishment of your earnings from your employment is limited to the lesser of twenty-five percent (25%) of your disposable income for a week, or the amount by which your disposable earnings for a week exceed \$217.00. More than twenty-five percent (25%) of your disposable earnings may be taken from your earnings for the payment of child support or alimony or if a Chapter 13 bankruptcy allows a higher amount.

PROTECT YOUR MONEY, INCLUDING WAGES, AND OTHER PROPERTY FROM BEING GARNISHED, YOU MUST:

1. Complete the Defendant’s Claim Form as set forth below, and
2. File this completed claim form with the Terrell County Magistrate Court at 499 Rountree Drive SW, Dawson, GA 39842

File your completed claim form as soon as possible. You may lose your right to claim an exemption if you do not file your claim form WITHIN TWENTY (20) DAYS AFTER THE GARNISHEE’S ANSWER IS FILED, or if you do not mail or deliver a copy of your completed claim form to the Plaintiff and the Garnishee at the addresses listed on this notice.

The Court will schedule a hearing within ten (10) days from when it received your claim form. The Court will mail you a notice with the time and date of the hearing to the address that you provide on your claim form. You may go to the hearing with or without an attorney. You will need to give the Court documents or other proof that your money is exempt.

Clerks cannot give you legal advice. IF YOU NEED LEGAL ASSISTANCE, YOU SHOULD SEE AN ATTORNEY. If you cannot afford a private attorney, legal services may be available.

DEFENDANT’S CLAIM FORM

I CLAIM EXEMPTION from garnishment. Some of my money or property held by the garnishee is exempt because it is (check all that apply):

- Social Security benefits
- Supplemental Security Income benefits
- Unemployment benefits
- Workers’ Compensation benefits
- Veterans’ benefits
- State Pension benefits
- Disability income benefits
- Money that belongs to a joint account holder
- Child Support or alimony
- Exempt wages, retirement, or pension benefits
- Other exemptions as provided by law and explained below:

I FURTHER STATE

- The Plaintiff does not have a judgement against me.
- The amount shown due on the Plaintiff’s Affidavit of Garnishment is incorrect.
- The Plaintiff’s Affidavit of Garnishment is untrue or legally insufficient.

Please send NOTICE OF HEARING on my claim to me at:

Address: _____

Phone number: _____

Email address: _____

This is to certify that I have this day served the plaintiff or Plaintiff’s Attorney and the Garnishee in the forgoing matter with a copy of this pleading by

- Service in person, OR
- Depositing in the United States Mail in properly addressed envelopes with adequate postage affixed thereon to be delivered to the addresses listed on this notice.

This ____ day of _____, 20__

Signature of Defendant of Defendant’s Attorney