# MAGISTRATE COURT OF MORGAN COUNTY, GEORGIA

Date Filed:_____ Case No._____

_____ _____

_____ _____

_____ Vs. _____

Plaintiff (s) Defendant

_____

_____ **GARNISHMENT**

_____

Garnishee

## NOTICE TO DEFENDANT OF RIGHT 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 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, workers' compensation, the Veterans' Administration, state pension, retirement funds, and disability income. This list of exemptions is available at the Magistrate Court office located at THE COURTHOUSE - MAGISTRATE COURT OF MORGAN COUNTY (Name of Court) 149 E. JEFFERSON STREET, MADISON, GA 30650 (Address) and on the website for the Attorney General (www.law.ga.gov).

Garnishment of your earnings from your employment is limited to the lesser of 25 percent of your disposable earnings for a week or the amount by which your disposable earnings for a week exceed $217.00. More than 25 percent 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.

**TO 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 Clerk of Court's office located at:
   Magistrate Court of Morgan County, 149 E. Jefferson Street, Mailing: P.O. Box 589, Madison, GA 30650.

   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 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 days from when it receives your claim form. The Court will mail you the time and date of the hearing at 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.

   **The Clerk of Court 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**

**Case No._____**

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

□ 1. Social security benefits.
□ 2. Supplemental security income benefits.
□ 3. Unemployment benefits.
□ 4. Workers' compensation.
□ 5. Veterans' benefits.
□ 6. State pension benefits.
□ 7. Disability income benefits.
□ 8. Money that belongs to a joint account holder.
□ 9. Child support or alimony.
□ 10. Exempt wages, retirement, or pension benefits.
□ 11. Other exemptions as provided by law.
Explain:

_____
_____
_____
_____

I further state: (check all that apply)

□ 1. The Plaintiff does not have a judgment against me.
□ 2. The amount shown due on the Plaintiff's Affidavit of Garnishment is incorrect.
□ 3. The Plaintiff's Affidavit of Garnishment is untrue or legally insufficient.

Send the notice of the hearing on my claim to me at:
Address:_____
Phone Number:_____
E-mail Address:_____

The statements made in this claim form are true to the best of my knowledge and belief.

_____ _____, 20_____
Defendant's signature Date