



STATE COURT OF FULTON COUNTY, GEORGIA
AFFIDAVIT OF GARNISHMENT
185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number Bar Number

vs.

Defendants Name, Address

Garnishees Name, Address

ALL FUNDS SHOULD BE REMITTED TO:

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

AFFIDAVIT OF GARNISHMENT

- ☐ Check if the Garnishee is a financial institution.
- ☐ Check if garnishment is for the collection of child support or alimony. See O.C.G.A. § 18-4-50. et seq.

Personally appeared _____ who on oath says:

1. I am the ☐ Plaintiff ☐ Attorney for Plaintiff ☐ Agent for Plaintiff.
2. The Plaintiff obtained a judgment against the Defendant in case number _____, in the _____ Court of _____ County, State of _____, and no agreement requires forbearance form garnishment which is applied for currently.
3. \$ _____ is the balance due, which consists of the sum of \$ _____ Principal,
4. \$ _____ Post Judgment Interest, and \$ _____ Other (e.g. prejudgment interest, attorney's fees, costs exclusive of the cost of this action.
5. Upon the Affiant's personal knowledge or belief, the sum stated herein is unpaid.☐

This the _____ day of _____, 2_____.

Printed Name of Affiant

Affiant Signature

Approved: **Wesley B. Tailor**, Judge
State Court of Fulton County

Sworn to and subscribed before me:

This the _____ day of _____, 2_____.

Notary Public/Deputy Clerk of Court



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number

Bar Number

vs.

Defendants Name, Address

Garnishees Name, Address

ALL FUNDS SHOULD BE REMITTED TO:

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

SUMMONS OF GARNISHMENT ON A FINANCIAL INSTITUTION

DO NOT USE THIS FORM IF THIS IS A CONTINUING GARNISHMENT

(SEE O.C.G.A. § 18-4-72 and 18-4-78) OR CONTINUING GARNISHMENT FOR CHILD SUPPORT OR ALIMONY

(SEE O.C.G.A. § 18-4-73 AND 18-4-80)

☐ Check this box if other allegations are made against a nonjudgment Defendant pursuant to O.C.G.A. 18-4-23.

☐ Check this box if this is a garnishment for child support or alimony.

TO THE ABOVE NAMED GARNISHEE:

Total amount claimed due be the Plaintiff \$ _____

Plus court costs due on the is summons \$ _____

Total garnishment claim \$ _____

COURT OF JUDGMENT: _____ COURT OF _____ COUNTY, STATE OF _____

JUDGMENT CASE#: _____

YOU ARE HEREBY COMMANDED to immediately hold all money, including wages, and other property, except what is known to be exempt, including property in safe-deposit boxes or similar property that you hold, belonging to the Defendant named above beginning on the day of service of this summons and including the next five days. You are **FURTHER COMMANDED** to file your answer, in writing, not sooner than five days and not later than 15 days after the date you were served with this summons, with the Clerk of this Court and serve a copy of your answer upon the Plaintiff or Plaintiff’s Attorney named above and the Defendant named above, or the Defendant’s Attorney, if known, at the time of making such answer. Your answer shall state what money, including wages, or other property, except what is known to be exempt, belonging to the Defendant you hold beginning on the day of service of this summons and including the next five days. Money, including wages, or other property admitted in an answer to be subject to garnishment must be sent or delivered to the Court concurrently with your answer.

If in answering this summons, you state that the property of the Defendant includes property in a safe-deposit box or similar property, you shall answer to the Court issuing this summons as to the existence of such safe-deposit box or similar property and shall restrict access to any contents of such safe-deposit box or similar property until further order of such Court regarding the disposition of such contents or 120 days from the date of filing your answer to this summons unless such time has been extended by the court, whichever is sooner.

Should you fail to file a Garnishee Answer as required by this summons, a judgment by default will be rendered against you for the amount remaining due on the judgment as shown in the Plaintiff’s Affidavit of Garnishment.

WITNESS, the Honorable Wesley B. Tailor, Judge of said Court.

This the _____ day of _____, 2_____.

Donald Talley, Clerk of Court

By: Adasha Battle, Chief Deputy Clerk



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number

Bar Number

vs.

ALL FUNDS SHOULD BE REMITTED TO:

Defendants Name, Address

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

Garnishees Name, Address

ATTACHMENT FOR SUMMONS OF GARNISHMENT ON A FINANCIAL INSTITUTION

1. Other known names of the Defendant:

2. Current and past addresses of the Defendant:

3. Social Security Number or Federal Tax I.D. Number of the Defendant:

4. Account or identification numbers of accounts of the Defendant used by Garnishee:

5. Other allegations pursuant to O.C.G.A. § 18-4-23

THIS PLEADING SHALL NOT BE FILED WITH THE COURT



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number

Bar Number

vs.

Defendants Name, Address

Garnishees Name, Address

ALL FUNDS SHOULD BE REMITTED TO:

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

FINANCIAL INSTITUTION GARNISHEE ANSWER

1. At the time of service of the Summons of Garnishment on a Financial Institution and including the next five days, the Garnishee has in its possession the following described money and property of the Defendant:

2. \$ _____ is the amount herewith paid into court.

3. ☐ Check if the Defendant is not presently an account holder of the Garnishee.

4. The Garnishee further states: _____

Garnishee, Garnishee Attorney, Officer, Employee

CERTIFICATE OF SERVICE

This is to certify that I have this day served the Defendant and the Garnishee in the foregoing matter with a copy of this pleading by depositing it in the United States Mail in a properly addressed envelope with adequate postage thereon.

This the _____ day of _____, 2_____.

Garnishee, Garnishee Attorney, Officer, Employee



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number

Bar Number

vs.

Defendants Name, Address

Garnishees Name, Address

ALL FUNDS SHOULD BE REMITTED TO:

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

SUMMONS OF GARNISHMENT

DO NOT USE THIS FORM IF THIS IS A CONTINUING GARNISHMENT

(SEE O.C.G.A. § 18-4-72 and 18-4-78) OR CONTINUING GARNISHMENT FOR CHILD SUPPORT OR ALIMONY

(SEE O.C.G.A. § 18-4-73 AND 18-4-80)

- ☐ Check this box if other allegations are made against a nonjudgment Defendant pursuant to O.C.G.A. 18-4-23.
- ☐ Check this box if this is a garnishment for child support or alimony.

TO THE ABOVE NAMED GARNISHEE:

Total amount claimed due be the Plaintiff \$ _____

Plus court costs due on the is summons \$ _____

Total garnishment claim \$ _____

COURT OF JUDGMENT: _____ COURT OF _____ COUNTY, STATE OF _____

JUDGMENT CASE#: _____

YOU ARE HEREBY COMMANDED to immediately hold all money, including wages, and other property, except what is known to be exempt, including property in safe-deposit boxes or similar property that you hold, belonging to the Defendant or obligations owed to the Defendant named above beginning on the day of service of this summons and including the next 29 days. You are **FURTHER COMMANDED** to file your answer, in writing, not sooner than 30 days and not later than 45 days from the date you were served with this summons, with the Clerk of this Court and serve a copy of your answer upon the Plaintiff or Plaintiff's Attorney named above and the Defendant named above, or the Defendant's Attorney, if known at the time of making such answer. Your answer shall state what money, including wages or other property except what is known to be exempt, belonging to the Defendant or obligations owed to the Defendant you hold beginning on the day of service of this summons and including the next 29 days. Money, including wages or other property admitted in an answer to be subject to garnishment must be sent or delivered to the Court concurrently with your answer.

If in answering this summons, you state that the property of the Defendant includes property in a safe-deposit box or similar property, you shall answer to the Court issuing this summons as to the existence of such safe deposit-box or similar property and shall restrict access to any contents of such safe-deposit box or similar property until further order of such Court regarding the disposition of such contents or 120 days from the date of filing your answer to this summons unless such time has been extended by the Court, whichever is sooner.

Should you fail to file a Garnishee Answer as required by this summons, a judgement by default will be rendered against you for the amount remaining due on a judgment as shown in the Plaintiff's Affidavit of Garnishment.

WITNESS, the Honorable Wesley B. Tailor, Judge of said Court.

This the _____ day of _____, 2_____.

Donald Talley, Clerk of Court

By: Adasha Battle, Chief Deputy Clerk



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number Bar Number

vs.

Defendants Name, Address

Defendants Name, Address

Garnishees Name, Address

ALL FUNDS SHOULD BE REMITTED TO:

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

ATTACHMENT FOR SUMMONS OF GARNISHMENT

1. Other known names of the Defendant:

2. Current and past addresses of the Defendant:

3. Social Security Number or Federal Tax I.D. Number of the Defendant:



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number Bar Number

vs.

Defendants Name, Address

Garnishees Name, Address

ALL FUNDS SHOULD BE REMITTED TO:

**Fulton County State Court
Garnishment Division
P.O. Box 740093
Atlanta, Georgia 30374-0093**

GARNISHEE ANSWER

1. At the time of service of the Summons of Garnishment and including the next twenty-nine days, the Garnishee has in its possession the following described money and property of the Defendant:

2. \$ _____ is the amount herewith paid into court.

3. ☐ Check if the Defendant is not presently an account holder of the Garnishee.

4. The Garnishee further states: _____

Garnishee, Garnishee Attorney, Officer, Employee

CERTIFICATE OF SERVICE

This is to certify that I have this day served the Defendant and the Garnishee in the foregoing matter with a copy of this pleading by depositing it in the United States Mail in a properly addressed envelope with adequate postage thereon.

This the _____ day of _____, 2_____.

Garnishee, Garnishee Attorney, Officer, Employee



STATE COURT OF FULTON COUNTY, GEORGIA

GARNISHMENT

185 Central Avenue, SW
Ground Floor TG400
Atlanta, Georgia 30303
(404) 613-5040

Dated Filed: ____/____/____

Case #: _____

Plaintiff Name

Plaintiff's Attorney

Street

Street

City State Zip

City State Zip

Phone Number

Phone Number

Bar Number

vs.

Defendants Name, Address

Garnishees Name, Address

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 does not include all possible exemptions. A more detailed list of exemptions is available at the Clerk of Court's office located at 185 Central Avenue, SW, Ground Floor TG400, Atlanta, GA 30303 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 on the following page; and
2. File this completed claim form with the Clerk of Court's office located at 185 Central Avenue, SW, Ground Floor TG400, Atlanta, GA 30303.

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 Number: _____

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. Exemptions for taxes due on income or earnings not subject to employer withholding.
- ☐ 12. 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: _____

Email Address: _____

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

This the _____ day of _____, 20____.

Defendant's signature

Print name of Defendant

CERTIFICATE OF SERVICE

This is to certify that I have this day served the Plaintiff or Plaintiff's Attorney and the Garnishee in the foregoing matter with a copy of this pleading by depositing it in the United States Mail in a properly addressed envelope with adequate postage thereon.

This _____ day of _____, 20____.

Defendant or Defendant's Attorney