MAGISTRATE COURT OF FULTON COUNTY, GEORGIA

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	s: (check all that apply)

() 1. Social security benefits.						
() 2. Supplemental security income	ome henefits					
() 3. Unemployment benefits.	ine 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, retiremen	() 10. Exempt wages, retirement, or pension benefits.					
() 11. Other exemptions as pro-	vided by law.					
Explain:						
I further state: (check all that ap	nlv)					
() 1. The Plaintiff does not have		inst me.				
() 2. The amount shown due or	n the Plaintiff's Af	ffidavit of Garnishment is incorrect.				
() 3. The Plaintiff's Affidavit of C	3arnishment is ur	ntrue or legally insufficient.				
Send the notice of the hearing of	on my claim to me	e at:				
Address:						
Phone Number:						
E-mail Address:						
The statements made in this cla	im form are true	to the best of my knowledge and belief.				
		,20				
Defendant's signature	Date					
Print name of Defendant						
	<u>CERTIFIC</u>	ATE OF SERVICE				
	of this pleading	e Plaintiff or Plaintiff's Attorney and the Garnishee in the by depositing it in the United States Mail in a properly ereon.				
This day of	. 20					
_·						
		Defendant or Defendant's Attorney				