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IN THE DISTRICT COURT FOR KING COUNTY
STATE OF WASHINGTON

Plaintiff,) NO.
)
vs.) EXEMPTION CLAIM
)
Defendant,)
)
and)
)
Garnishee Defendant.)

INSTRUCTIONS:

1. Read this whole form after reading the enclosed notice. Then put an "X" in the box or boxes that describe your exemption claim or claims and write in the necessary information on the blank lines.

2. Make two copies of the completed form. Deliver the original form by first class mail or in person to the clerk of the court, whose address is shown at the bottom of the writ of garnishment. Deliver one of the copies by first class mail or in person to the plaintiff or plaintiff's attorney whose name and address are shown at the bottom of the writ. Keep the other copy. YOU SHOULD DO THIS AS QUICKLY AS POSSIBLE, BUT NO LATER THAN 28 DAYS (4 WEEKS) AFTER THE DATE ON THE WRIT.

I/We claim the following money or property is exempt:

IF BANK ACCOUNT IS GARNISHED:

- The account contains payments from:
- Temporary assistance for needy families, SSI, or other public assistance. I receive \$ _____ monthly.
- Social Security. I receive \$ _____ monthly.
- Veteran's Benefits. I receive \$ _____ monthly.
- U.S. Government Pension. I receive \$ _____ monthly.
- Unemployment Compensation. I receive \$ _____ monthly.
- Child Support. I receive \$ _____ monthly.
- Other. Explain:

1 IF EXEMPTION IN BANK ACCOUNT IS CLAIMED, ANSWER ONE OR BOTH OF
THE FOLLOWING:

- 2 [] No money other than from above payments are in the account.
3 [] Moneys in addition to the above payments have been deposited in the account.
4 [] Explain: _____

5 IF EARNINGS ARE GARNISHED FOR CHILD SUPPORT:

- 6 [] I claim maximum exemption.
7 [] I am supporting another child or other children.
8 [] I am supporting a husband or wife.

9 IF PENSION OR RETIREMENT BENEFITS ARE GARNISHED:

- 10 [] Name and address of employer who is paying the benefits:

11 OTHER PROPERTY:

- 12 [] Describe property: _____

13 (If you claim other personal property as exempt, you must attach a list of all other
14 personal property that you own.)

15
16 Printed Name _____ If married, Name of Spouse _____

17
18 Your Signature _____ Signature of Spouse _____

19
20 Your address: _____ Spouses address (If different than yours) _____

21
22 Telephone number: _____ Telephone number:(If different from yours) _____

23 **CAUTION:** If the plaintiff objects to your claim, you will have to go to court and give
24 proof of your claim. For example, if you claim that a bank account is exempt, you may
25 have to show the judge your bank statements and papers that show the source of the
money you deposited in the bank. Your claim may be granted more quickly if you attach
copies of such proof to your claim.

26 **IF THE JUDGE DENIES YOUR EXEMPTION CLAIM, YOU WILL HAVE TO PAY**
27 **THE PLAINTIFF'S COSTS. IF THE JUDGE DECIDES THAT YOU DID NOT MAKE**
28 **THE CLAIM IN GOOD FAITH, HE OR SHE MAY DECIDE THAT YOU MUST PAY**
THE PLAINTIFF'S ATTORNEY FEES.