

In the (circle one): District / Circuit Court of (county): \_\_\_\_\_ County, Alabama

\_\_\_\_\_ v. \_\_\_\_\_

**Plaintiff's first and last name**  
*(The person who started this case)*
**Your first and last name**  
*(You are the Defendant)*

- ① I am the Defendant in this case.
- ② I declare that the following information is true:
- I am an adult and of sound mind.
  - My name is on this bank account (account number): \_\_\_\_\_  
(name of bank): \_\_\_\_\_
  - My contact information is (street address): \_\_\_\_\_  
(city, state, zip): \_\_\_\_\_  
(phone #): \_\_\_\_\_
- ③ I ask the Court to stop the garnishment of money from this account, and to order a refund of any money that has already been garnished, because (check all that apply):
- a.  All funds in this account are from Social Security benefits or SSI.
  - b.  All funds in this account are from Veterans Administration benefits.
  - c.  All funds in this account are from (specify): \_\_\_\_\_, which is protected from garnishment. (Most child support, welfare, TANF, unemployment compensation, workman's compensation, and some retirement or disability benefits are protected from garnishment.)
  - d.  All funds in this account belong to someone else (explain below):  
(Other person's name): \_\_\_\_\_  
(Other person's relationship to you): \_\_\_\_\_  
(Reasons your name is on the account): \_\_\_\_\_
- ④ **I swear that all of the information I provided above is complete and accurate. I understand that if I lie on this form, I can be fined and sent to jail.**
- Sign below in front of a notary:
- ▶ \_\_\_\_\_ Date: \_\_\_\_\_

**Notary fills out below—**

Sworn to and subscribed before me, the undersigned authority, ┌

By (Print name of notary): \_\_\_\_\_ └

On this date: \_\_\_\_\_ / / \_\_\_\_\_ (Notary's seal here)

▶ \_\_\_\_\_

Notary signs here
Date notary's commission expires
┌
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**Certificate of Service — (Server fills out below.)**

I certify that a true copy of this *Request* was mailed first class, postage prepaid to the Plaintiff or his/her lawyer on (date): \_\_\_\_\_, at this address →

street address	city
state	zip

Sign here **after** mailing or delivering: ▶ \_\_\_\_\_ Date: \_\_\_\_\_