



Samples

Claim of Exemption (Wage Garnishment)

RETURN TO LEVYING OFFICER. DO NOT FILE WITH COURT		WG-006
1	ATTORNEY OR PARTY IN COURT (ATTORNEY NAME, ADDRESS, PHONE NUMBER) PETER PERPETRATOR 11 MAIN ST. #22 SACRAMENTO, CA 95814 TELEPHONE NO 916-123-9876 FAX NO (OPTIONAL) E-MAIL ADDRESS (OPTIONAL) ATTORNEY OR PARTY NAME IN PRO PER	2 FOR LEVYING OFFICER USE ONLY (Levy Officer Name and Address) Sacramento County Sheriff's Department Civil Division 3341 Power Inn Road Sacramento, CA 95826
3	SUPERIOR COURT OF CALIFORNIA, COUNTY OF Sacramento STREET ADDRESS 720 Ninth Street MAILING ADDRESS 720 Ninth Street CITY AND ZIP CODE Sacramento, CA 95814 COUNTY NAME Civil	
4	PLAINTIFF/PETITIONER PAUL SAMPLE DEFENDANT/RESPONDENT PETER PERPETRATOR	5 LEVYING OFFICER FILE NUMBER 11-0004958
CLAIM OF EXEMPTION (Wage Garnishment)		FOR COURT USE ONLY
READ EMPLOYEE INSTRUCTIONS (FORM WG-003) BEFORE COMPLETING THIS FORM Copy all the information required above (except the top left space) from the Earnings Withholding Order. The top left space is for your name or your attorney's name and address. The original and one copy of this form with the Financial Statement attached must be filed with the levying officer. DO NOT FILE WITH THE COURT.		
	6 CASE NUMBER 34-2011-00012345	
7	1. My name is: PETER PERPETRATOR 2. I need the following earnings to support myself or my family (check a or b) a. <input checked="" type="checkbox"/> All earnings. b. <input type="checkbox"/> \$ _____ each pay period.	
	3. Please send all papers to <input checked="" type="checkbox"/> me. <input type="checkbox"/> my attorney at the address <input checked="" type="checkbox"/> shown above <input type="checkbox"/> following (specify):	
8	4. I am willing for the following amount to be withheld from my earnings each pay period during the withholding period. I understand that the judgment creditor can accept this offer by not opposing the Claim of Exemption, which will result in the following sum being withheld each pay period (check a or b). a. <input checked="" type="checkbox"/> None b. <input type="checkbox"/> Withhold \$ 0.00 each pay period.	
9	5. I am paid <input type="checkbox"/> daily <input type="checkbox"/> every two weeks <input type="checkbox"/> monthly <input checked="" type="checkbox"/> weekly <input checked="" type="checkbox"/> twice a month <input type="checkbox"/> other (specify):	
NOTE: You must attach a properly completed Financial Statement form to this Claim of Exemption. The Financial Statement form is available without charge from the levying officer. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date: 7/13/2011		
10	11 PETER PERPETRATOR	
(1) NAME OR PARTY NAME (2) COURT NAME (3) DECLARANT (4) PAGE 1 of 1 2011 Approved by Pa. Judicial Council, 9/26/2010. (WS) 08 (Rev. 1/1/2011) CLAIM OF EXEMPTION (Wage Garnishment) Case of Co. Processed 1/18/12 www.courts.ca.gov		

- 1** Your name, address, and phone number. "In Pro Per" means you are representing yourself.
- 2** Insert the name and address of the Sheriff's Civil Division as shown on the Earnings Withholding Order (EWO).
- 3** Court name, address, and branch.
- 4** Plaintiff = Judgment Creditor
Defendant = Judgment Debtor.
- 5** Sheriff's Levy number.
- 6** Case Number.
- 7** Check the boxes that pertain to your situation and indicate where you want the mail sent.
- 8** Check either box 4a or 4b to indicate what you consent to have withheld from your paychecks.
- 9** Check the appropriate box.
- 10** Print Name and Date.
- 11** Signature.



Financial Statement

WG-007/ EJ-165

1

SHORT TITLE: SAMPLE v PERPETRATOR	LIVING OR FIDUCIARY NO. 2 1-0004958	COURT CASE NO. 3 1-000000000000000000
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FINANCIAL STATEMENT
 (Wage Garnishment - Enforcement of Judgment)

NOTE: If you are married, this form must be signed by your spouse unless you and your spouse are living separate and apart. If this form is not signed by your spouse, check the applicable box on the reverse in item 9.

4

1. The following persons (other than myself) depend, in whole or in part, on me or my spouse for support.

	NAME	AGE	RELATIONSHIP TO ME	MONTHLY TAKE-HOME INCOME & SOURCE
a.	none		Spouse	none
b.				
c.				
d.				
e.				

5

2. My monthly income

a. My gross monthly pay is: 2a. \$ 2,448.71

b. My payroll deductions are (specify purpose and amount):

(1) Federal and state withholding, FICA, and SDI	\$ 289.74
(2) Med/Den/Via	\$ 200.00
(3) _____	\$ _____
(4) _____	\$ _____

My TOTAL payroll deduction amount is (add (1) through (4)): b. \$ 489.74

c. My monthly take-home pay is (a minus b): c. \$ 1,958.97

d. Other money I get each month from (specify source): d. \$ _____

e. TOTAL MONTHLY INCOME (c plus d): e. \$ 1,958.97

6

3. I, my spouse, and my other dependents own the following property:

a. Cash 3a. \$ 0.00

b. Checking, savings, and credit union accounts (list banks):

(1) Chase Bank	\$ 35.00
(2) _____	\$ _____
(3) _____	\$ _____

b. \$ 35.00

c. Cars, other vehicles, and boat equity (list make, year of each):

(1) 2005 Ford Fusion	\$ 0.00
(2) _____	\$ _____
(3) _____	\$ _____

c. \$ 0.00

d. Real estate equity d. \$ 0.00

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.) (list separately):

e. \$ 0.00

Page 1 of 2

FINANCIAL STATEMENT
(Wage Garnishment - Enforcement of Judgment)

1 Insert judgment creditor's last name v. your last name.

2 Sheriff's levy number.

3 Court Case number.

4 Insert names, ages, and relationship to you of anyone you are supporting, and any income they may have. If none, state none.

5 Enter your income and payroll deductions. Add lines c and d, then insert Total Monthly Income.

6 Insert your bank account, vehicle, and real estate information, including the equity, if any. Equity = value minus amount owed.

Financial Statement (WG-007/EJ-165) (page 1)



WG-007/EJ-165

1 SHORT TITLE
SAMPLE v PERPETRATOR

2 JUDGMENT CREDITOR CASE NO
11-0004958

3 COURT CASE NO
0011-00012345

4 The monthly expenses for me, my spouse, and my other dependants

a. Rent or house payment and maintenance	4a. \$	750.00
b. Food and household supplies	b. \$	250.00
c. Utilities and telephone	c. \$	225.00
d. Clothing	d. \$	0.00
e. Medical and dental payments	e. \$	0.00
f. Insurance (life, health, accident, etc.)	f. \$	0.00
g. School, child care	g. \$	0.00
h. Child, spousal support (prior marriage)	h. \$	0.00
i. Transportation & auto expenses (insurance, gas, repair) (list car payments in item 5)	i. \$	405.00
j. Installment payments (insert total and itemize below in item 5)	j. \$	399.00
k. Laundry and cleaning	k. \$	30.00
l. Entertainment	l. \$	0.00
m. Other (specify): none	m. \$	0.00
n. TOTAL MONTHLY EXPENSES (add a through m).	n. \$	2,059.00

5 I, my spouse, and my other dependents owe the following debts:

CREDITOR'S NAME	FOR	MO. PAYMENTS	BALANCE OWED	OWED BY (State person's name)
Ford Motor Company	car payments	399.00	9,852.00	Peter

6 Other facts which support this Claim of Exemption (i.e., unusual medical needs, school tuition, expenses for recent family emergencies, or other unusual expenses to help your creditor and the judge understand your budget) (describe if more space is needed, attach page labeled Attachment 6)

My take home income barely covers of my basic necessities. There are some months that I am unable to pay all of my basic necessities and to have to add additional payments will cost me my living arrangements.

7 An earnings withholding order is now in effect with respect to my earnings or those of my spouse or dependents named in item 1 (specify each person's name and monthly amount).

A wage assignment for support is now in effect with respect to my earnings or those of my spouse or dependents named in item 1 (specify each person's name and monthly amount).

8 My spouse has signed below.
 I have no spouse
 My spouse and I are living separate and apart.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 07/13/2011

9 PETER PERPETRATOR
(TYPE OR PRINT NAME)

(SIGNATURE)

(SIGNATURE OF SPOUSE)

1 Insert judgment creditor's last name v. your last name.

2 Sheriff's levy number.

3 Court Case number.

4 Insert responses to 4a through 4m. Do not leave blank; if there are no expenses insert 0.00 on the line.

5 Insert any creditors you are paying on a monthly basis. Total amount and insert in 4.

6 Insert reasons why you are unable to pay 25% of wages toward judgment.

7 Insert information if applicable.

8 Indicate if you have a spouse.

9 Print your name, date, and sign. If you have a spouse they must also sign.