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## **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. If additional space is needed, use the bottom of the last page or attach another sheet.
- 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 as exempt:

## IF BANK ACCOUNT IS GARNISHED:

[]	The account contains payments from:		
	[] TANF, SSI, or other public assistance. I recei	ive \$	monthly
	[] Social Security. I receive \$	monthly.	
	[] Veteran's Benefits. I receive \$	monthly.	
Exem WPF	ption Claim (EXMPCL) - Page 1 of 3 GARN 01.0500 (07/2019) - RCW 6.27.140		

	[] Unemployment Compensation	n. I receive \$ monthly.		
	[] Child support. I receive \$	monthly.		
	Government Pension, federal account (IRA) 401K, 403(b) a 41.50.030. I receive \$	ounts including, but not limited to, U.S. ly qualified pension, individual retirement nd any state retirement system listed in RCW monthly.		
[]	\$2,500 exemption if this garnishm	ent is for private student loan debts.		
[]	\$2,000 exemption if this garnishment is for consumer debts.			
[]	\$500 exemption for all other debts.			
	KEMPTION IN BANK ACCOUNT IS LOWING:	S CLAIMED, ANSWER ONE OR BOTH OF THE		
	<ul><li>[ ] No money other than from aboaccount.</li><li>(Explain:)</li></ul>	ove payments are in the account. ve payments have been deposited in the		
ОТН	ER PROPERTY:			
	[] Describe property: (If you clain attach a list of all other person	m other personal property as exempt, you must nal property that you own.)		
Print: Your name		If married or in a state registered domestic partnership, name of husband/wife/state registered domestic partner		
Your signature		Signature of husband, wife, or state registered domestic partner		

Address	Address (if different from yours)
<del></del>	
Telephone number	Telephone number (if different from yours)

CAUTION: If the plaintiff objects to your claim, you will have to go to court and give proof of your claim. For example, if you claim that a bank account is exempt, you may 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.

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