

**REQUEST FOR HEARING
PERSONAL EARNINGS**

Case No. _____

The State of Ohio
County of Cuyahoga, SS



Clerk's Received Stamp

_____, **Judgment Creditor**

vs.

_____, **Judgment Debtor**

GARFIELD HEIGHTS MUNICIPAL COURT
ATTN: GARNISHMENTS
5555 TURNEY ROAD
GARFIELD HEIGHTS, OH 44125-3778
PHONE: (216) 475-1900

I dispute the judgment creditor's right to garnish my personal earnings in the above case and request that a hearing in this matter be held no later than twelve (12) days after delivery of this request to the court.

I do / do not (circle one) feel that the need for a hearing is an emergency.

I dispute the Judgment Creditor's right to garnish my personal earnings for the following reasons:

(optional)

I UNDERSTAND THAT NO OBJECTIONS TO THE JUDGMENT ITSELF WILL BE HEARD OR CONSIDERED AT THE HEARING.

Print Name of Judgment Debtor

Address of Judgment Debtor

Signature of Judgment Debtor

Email Address

Text Number

Date: _____

WARNING: IF YOU DO NOT DELIVER THIS REQUEST FOR HEARING OR A REQUEST IN A SUBSTANTIALLY SIMILAR FORM TO THE OFFICE OF THE CLERK OF THIS COURT WITHIN FIVE (5) BUSINESS DAYS OF YOUR RECEIPT OF IT, YOU WILL WAIVE YOUR RIGHT TO A HEARING, AND SOME OF YOUR PERSONAL EARNINGS WILL BE PAID TO THE ABOVE-NAMED JUDGMENT CREDITOR IN SATISFACTION OF YOUR DEBT TO THE JUDGMENT CREDITOR.