

MAGISTRATE COURT OF FULTON COUNTY
AFFIDAVIT FOR CONTINUING GARNISHMENT
GEORGIA, FULTON COUNTY

Garnishment # _____
DO NOT WRITE IN THIS SPACE

PLAINTIFF _____

VS

DEFENDANT'S SOCIAL SECURITY # _____

DEFENDANT NAME & ADDRESS _____

To: _____

PLAINTIFF OR ATTORNEY NAME AND ADDRESS _____

GARNISHEE'S NAME AND ADDRESS _____

PHONE NUMBER _____

NOTICE

1. \$ _____ is the amount claimed + Garnishment cost of \$ _____.
2. Judgment was obtained in the _____ Court of _____ County.
3. _____ is the Judgment number.

Personally appeared the undersigned affiant, who on oath says that he/she is the above plaintiff, agent or attorney at law, and that he/she has personal knowledge that the above defendant is indebted to said plaintiff on a judgment as described above. Plaintiff believes that defendant may be employed by garnishee.

Sworn to and subscribed before me:

This _____ day of _____, 20____.

Deputy Clerk or Notary Public _____

Affiant _____

Approved _____ Judge

State Court of Fulton County

PLAINTIFF REQUESTS ANY FUNDS
 RECEIVED ON THIS GARNISHMENT BE CONDEMNED.

CONTINUING GARNISHMENT