

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

PLAINTIFF

VS

DEFENDANT'S SOCIAL SECURITY NUMBER

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

14-091-200