

**MAGISTRATE COURT OF LAURENS COUNTY
STATE OF GEORGIA**

Date Filed _____

Case No. MC20_____ - _____

Plaintiff(s) Name

Street

GARNISHMENT

City State Zip Code

E-Mail Address

Phone Number Bar Number
vs.

**Garnishment Court Information:
Magistrate Court of Laurens County
101 North Jefferson Street
P O Box 2028
Dublin, Georgia 31021
478-272-3210 Phone**

Defendant(s) Name, Address

Garnishee Name, Address

AFFIDAVIT OF CONTINUING GARNISHMENT

DO NOT USE THIS FORM FOR A CONTINUING GARNISHMENT FOR CHILD SUPPORT OR ALIMONY. SEE O.C.G.A. § 18-4-73.

Personally appeared (Print Name) _____ who on oath says:

1. I am the (Plaintiff) (Attorney for Plaintiff) (Agent for Plaintiff). **[Circle one]**
2. The Plaintiff obtained a judgment against the Defendant in Case Number _____, in the _____, Court of _____, County, _____ State, and no agreement requires forbearance from the garnishment which is applied for currently.
3. \$_____ is the balance due, which consists of the sum of \$_____ Principal, \$_____ Post Judgment interest, and \$_____ Other (e.g., prejudgment interest, attorney's fees, costs (exclusive of the cost of this action))
4. Upon the Affiant's personal knowledge or belief, the sum stated herein is unpaid.
5. The Affiant believes that the Garnishee is an employer of the Defendant.

This _____ day of _____ 20_____.

Affiant

Sworn to and subscribed before me:

Print Name of Affiant

This _____ day of _____ 20_____.

Notary Public/Deputy Clerk of Court

Approved, this _____ day of _____, 20_____.

Magistrate Judge of Laurens County