

State of Tennessee	Court General Sessions Civil Division	County KNOX
Request to Protect Income and Assets (Motion to Quash Garnishment/ Execution and Claim Exemption Rights)		File No. _____ <small>(Must Be Completed)</small>
		Division _____ <small>(Large Counties Only)</small>

Plaintiff/Creditor _____ <small>(Name: First, Middle, Last of person/company that filed lawsuit)</small>
Defendant/Debtor _____ <small>(Name: First, Middle, Last of the other person)</small>

Name and address of your Employer, if you have a job: _____				
<small>Employer's name</small>				
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;"><small>Street address</small></td> <td style="width: 33%; border: none;"><small>City</small></td> <td style="width: 17%; border: none;"><small>State</small></td> <td style="width: 17%; border: none;"><small>Zip</small></td> </tr> </table>	<small>Street address</small>	<small>City</small>	<small>State</small>	<small>Zip</small>
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Certain kinds of income and property are protected from garnishment, even if there is a court order. You may use this form to ask the court for a hearing and orders to protect or return the items checked below (TCA §§26-2-101 – 26-2-410). You should bring documents to show why this money should be protected.

You may have to pay a filing fee. Can't afford the fee? Ask the court clerk for a paper called a Request to Postpone Filing Fees and Order (Uniform Civil Affidavit of Indigency). Or go on the internet to www.tncourts.gov or www.justiceforalltn.com to get the form.

- ① I am the Defendant/Debtor in the Court case listed above, and I ask the court to protect my exempt income, benefits, and property checked below wherever located. (Check all that apply):
- | | |
|---|---|
| <input type="checkbox"/> Social Security | <input type="checkbox"/> Government Pension* |
| <input type="checkbox"/> SSI (Supplemental Security Income) | <input type="checkbox"/> Health Care Aids*, |
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Insurance Benefits* |
| <input type="checkbox"/> TANF | <input type="checkbox"/> Tools of Trade* (things you need to earn a living) |
| <input type="checkbox"/> Veterans Benefits | <small>* These are usually exempt.</small> |
| <input type="checkbox"/> Student Loans and Grants | |
- Check here if your employer has already garnished the maximum amount allowed. (At this time, the law allows you to keep at least \$217.50 of your weekly paycheck. If your weekly pay is more than \$217.50, the amount that can be taken (garnished) is the difference between your net weekly pay and \$217.50 or 25% of your net wage, whichever is greater.)
- Other (see TCA 26-2-111 (specify): _____)

② If any item checked above has already been taken or garnished, list the bank or agency that that took it or garnished it: _____

③ I will prove that the items checked above are protected by federal or state law at a court hearing.

▶ Defendant/Debtor or Attorney for Defendant/Debtor signs here: _____

Date: _____

④ Date and time of the Hearing. (The court clerk will tell you this information).

This case is set for hearing at the court above on _____, 20____ at 9:00 A.M.
(month/date) (year) (time)
located at: 300 Main Street Knoxville, TN 37902, Room # 331.
(street) (city, state, zip)

Deputy Clerk
CHARLES D. SUSANO III, CLERK OF KNOX COUNTY GENERAL SESSIONS CIVIL DIVISION

**Bring the original and 2 copies of this form to the Court Clerk to be date stamped.
Give the original to the Court Clerk.
Bring a stamped envelope addressed for each plaintiff to the Court Clerk. Mail one copy to
the lawyer or if there is no lawyer, mail it to the plaintiff or company that sued you. Keep one
copy for yourself.**

Certificate of Service

(How I gave this paper to the Plaintiff/Creditor)

I certify that I (**check one box**)

hand delivered or

mailed by first-class mail, properly addressed, a true and correct copy of this paper to the person listed below at the address below:

Name of Who You Are Giving This To (The creditor's lawyer or the creditor if no lawyer)

Address of the Lawyer or the Creditor (Include City, State and Zip Code)

on _____
(Date you mailed/hand-delivered the copy)



Sign Your Name

IMPORTANT!

Take any proof that supports your case to the hearing, including: witnesses, photos, papers, receipts, etc. The court will not accept written statements from witnesses. The person must go to court in person. If you think a witness may not want to go to court, ask the clerk for subpoena forms. Complete the subpoena as soon as possible so the sheriff can serve them before court.

The court and clerks are not allowed to give you legal advice, even if you don't have a lawyer. This form is a public record. It is not legal advice. The law may change and it is best to consult with a lawyer if possible.

DO NOT FILL OUT THIS SECTION BELOW. THE JUDGE WILL FILL THIS SECTION OUT AT COURT.

- The court **denies** this Request because (judge will check all that apply):
 - The defendant did not prove that the income and assets listed should be protected.
 - The defendant did not go to the court hearing for this case, and must pay the judgment as previously ordered. This Request is dismissed.



- The court **approves** this Request because the defendant proved that the income and assets listed should be protected:

- This decision was made by (check one):
 - The Plaintiff/Creditor did not come to court (Default).
 - The judge at the court hearing
 - Agreement of both sides

Judge's signature:  _____ Date: _____