

# Garnishment Agreement

Date \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Client's Name and Address (where the garnished money will be sent)

\_\_\_\_\_

Defendant #1 \_\_\_\_\_ SS# \_\_\_\_\_

Employer Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Employer Address \_\_\_\_\_

Name of Individual You Verified Employment With and Date \_\_\_\_\_

Defendant #2 \_\_\_\_\_ SS# \_\_\_\_\_

Employer Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Employer Address \_\_\_\_\_

Name of Individual You Verified Employment With and Date \_\_\_\_\_

Defendant's Current Address \_\_\_\_\_

*By signing below, I \_\_\_\_\_, understand that claiming false information may lead to claims regarding Fair Debt Collection Practices Act (FDCPA) against Giles & Dickson, P.C. In the event the amounts provided are incorrect, I agree to indemnify and hold Giles & Dickson, P.C. harmless in any suit filed for damages, costs and attorney's fees that incurred as a result of said claim.*

*I also understand all of the fees incurred through this process are paid by Giles & Dickson, P.C., and are garnished from the Defendant's wages. If the Defendant terminates employment, files bankruptcy, has prior liens or any other reason that we are unable to garnish, that I am responsible for the filing fee and process server fee. I hereby agree to the terms of this garnishment per the procedures laid out in the forms and avow that all of the information given is accurate to the best of my knowledge.*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*