

Person Filing: _____
Mailing Address: _____
City, State, Zip: _____
Phone: (_____) _____ - _____
Representing: Self Attorney Other State Bar No. _____



Maricopa County Justice Courts, Arizona

CASE NUMBER: _____

REQUEST FOR HEARING (EARNINGS)

Judgment Creditor Name / Address / Email / Phone

Judgment Debtor Name / Address / Email / Phone

Garnishee Name / Address / Email / Phone

1. I am the: *Check one*

- Judgment creditor or authorized representative
- Judgment debtor or authorized representative
- Garnishee or authorized representative

2. The reason I am requesting a hearing is because: *Attach additional sheets if necessary*

Copy provided to judgment debtor on:

Date: _____

By: Mail Hand delivery

Copy provided to garnishee on:

Date: _____

By: Mail Hand delivery

Copy provided to judgment creditor on:

Date: _____

By: Mail Hand delivery

The Court can call me at _____ between 8 a.m. and 5 p.m. regarding the hearing, if necessary.

Date _____
Signature _____

WARNING: Your hearing request may be subject to a filing deadline.