

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: <input type="checkbox"/> Mail <input type="checkbox"/> Hand delivery	Copy provided to garnishee on: Date: _____ By: <input type="checkbox"/> Mail <input type="checkbox"/> Hand delivery
Copy provided to judgment creditor on: Date: _____ By: <input type="checkbox"/> Mail <input type="checkbox"/> 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.