State of Tennessee	CIRCUIT COU	RT	Dav	vidson County
Request to Protect Income and Assets (Motion to Quash Garnishment/ Execution and Claim Exemption Rights)		Case No.	(Must Be Completed)	
Plaintiff/Creditor				
	(Name: First, Middle, Last o	f person/company	that filed lawsuit)
Defendant/Debtor	(Name: First, Middle	, Last of the other	person)	
Name and address of your Em	ployer (if you have a job):		Employer's n	ame
Street address	City		State	Zip
$\widehat{\mathbb{D}}$ I am the Defendant/Debto	or in the Court case listed ab	ove, and I as	sk the Court	to protect my exempt
•	operty checked below where	ever located	(check all th	at apply):
□ Social Security		Governmen		
☐ SSI (Supplemental S	Security Income)	Health Care		
☐ Unemployment☐ TANF		Insurance E		vou pood to com a living)
☐ Veterans Benefits		10015 01 116	, ,	ou need to earn a living)
☐ Student Loans and	Grants		" I No	ese are usually exempt
☐ Check here if your enter the law allows you to than \$217.50, the	employer has already garnish o keep at least \$217.50 of yo amount that can be taken 7.50 or 25% of your net wage	our weekly pa [garnished] is	ycheck. If you	our weekly pay is more
☐ Other (see <i>T.C.A.</i> §	26-2-111 (specify):			
	ve has already been taken	•		nk or agency that took

3 I will prove that the items checked above are pr	otected by federal or sta	ate law at a Court hearing.
Defendant/Debtor or Atty for Defendant/Debtor	signs here:	
Date:		
Date and time of the hearing (the Court Clerk w		on).
This case is set for hearing at the Court above on		, 20 at
located at:	(month/date)	(year) (time) , Room #
located at:(street)	(city, state, zip)	
Clerk or Deputy Clerk		
Bring the original and 2 copies of this for Give the original t Bring a stamped envelope addressed Mail one copy to the lawyer or if there is no lawyer Keep one cop	o the Court Clerk. I for each plaintiff to th	e Court Clerk.
	e of Service r to the Plaintiff/Creditor	·)
I certify that I (check one box)		
□ hand delivered <u>or</u>		
☐ mailed by first-class mail, properly address below:	ressed, a true and cor	rrect copy of this paper to the
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, S	State and Zip Code)	
on (Date you mailed/hand-delivered copy)		
_		
	Sign `	Your Name
IMPOI	RTANT!	

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.