STATE COURT OF DEKALB COUNTY

AFFIDAVIT FOR CONTINUING GARNISHMENT FOR SUPPORT

GEORGIA, DEKALB COUNTY			
	Case Number		
	_		
Plaintiff (Name & Address)		orney (Name, Address, Phone & Email))
VS	·		_
			_
Defendant (Name & Address)			_
Defendant (Ivanie & Address)	—		_
	_		
Garnishee (Name & Address)	_		
Personally appeared	who on oath says I am the (Plairt in an amount equal to or in excess of or my which is applied for currently. (Certified or	ntiff) (Attorney for Plaintiff) (Agent for ne month's obligation as decreed on a ju opy attached)	Plaintiff) [Circle one] and that described and r
1. \$ is the amo			
Judgment was obtained in the			
3 is the case	e number.		
4. The periodic amount of support due under the			
PERIODIC AMOUNT DUE	OBLIGEE	TERMINATION D OF OBLIGATION	
\$			
\$			
5. Pursuant to O.C.G.A. 18-4-89, Plaintiff/Plain certification being filed with said clerk their proof of	atiff's Attorney makes application for conder	mnation of any funds delivered to this (Court by the Garnishee upo
Upon the Affiant's personal knowledge or belief, t defendant.	the sum stated herein is unpaid. Affiant fur	rther states that affiant believes that gar	nishee is an employer of th
	Affiant		
	Print name of	f Affiant	
Sworn to and subscribed to before me.	Approx	ved this day of	20
This day of, 20	— —	day of	, 20
	Deputy	Clerk, State Court of DeKalb Count	y
Notary Pubic My Commission Expires:			
my Commission Expires.			