

# REQUEST FOR HEARING PERSONAL EARNINGS

Clerk's Filed Date Stamp

CLEVELAND MUNICIPAL COURT  
1200 ONTARIO STREET  
CLEVELAND, OH 44113  
ATTN: CLERK OF COURTS-GARNISHMENT DEPT  
PHONE: (216) 664-4859

CASE NO. \_\_\_\_\_ CV \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ vs. \_\_\_\_\_  
Judgment Creditor Judgment Debtor

I **dispute** the judgment creditor's right to garnish my personal earnings in the above case and request a hearing in this matter be held no later than twelve days after delivery of this request to the court.

I **do** / **do not** (click one) feel that the need for the hearing is an emergency.

I dispute the judgment creditor's right to garnish my personal earnings for the **following reasons**:

Optional: \_\_\_\_\_

**I UNDERSTAND THAT NO OBJECTIONS TO THE  
JUDGMENT ITSELF WILL BE HEARD OR CONSIDERED  
AT THE HEARING.**

\_\_\_\_\_  
(Print Name of Judgment Debtor)

\_\_\_\_\_  
(Signature of Judgment Debtor)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Address & Street)

\_\_\_\_\_  
(City, State & Zip Code)

\_\_\_\_\_  
(Area Code) (Phone Number)

Garnishee/Employer must deliver two copies of the *Request for Hearing/Personal Earnings form* to Judgment Debtor/Employer upon receipt.

Request for Hearing on Personal Earnings (O.R.C. 2716.06)

**WARNING: IF YOU DO NOT DELIVER THIS REQUEST FOR HEARING OR A REQUEST IN A SUBSTANTIALLY SIMILAR FORM TO THE OFFICE OF THE CLERK OF THIS COURT WITHIN FIVE(5) BUSINESS DAYS OF YOUR RECEIPT OF IT, YOU WAIVE YOUR RIGHT TO A HEARING AND SOME OF YOUR PERSONAL EARNINGS WILL BE PAID TO THE JUDGMENT CREDITOR IN SATISFACTION OF YOUR DEBT TO THE JUDGMENT CREDITOR.**

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**FOLD ON LINE, SEAL WITH TAPE OR GLUE AND MAIL**

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