

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court address: _____ Plaintiff(s): _____ v. Defendant(s): _____	
Judgment Debtor's Attorney or Judgment Debtor (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty.Reg. #: _____	▲ COURT USE ONLY ▲ Case Number: _____ Division _____ Courtroom _____
OBJECTION TO CALCULATION OF THE AMOUNT OF EXEMPT EARNINGS	

Instructions to Judgment Debtor: Use this form to object to the calculations of your exempt earnings.

Name: _____ Phone Number: _____
 Street Address: _____
 Mailing Address, if different: _____
 City: _____ State: _____ Zip Code: _____

EXEMPTION CHART ("Minimum Hourly Wage" means state or federal minimum wage, whichever is greater.)	PAY PERIOD Weekly Bi-Weekly Semi-monthly Monthly	AMOUNT EXEMPT IS THE GREATER OF: 30 x Minimum Hourly Wage or 75% of Disposable Earnings 60 x Minimum Hourly Wage or 75% of Disposable Earnings 65 x Minimum Hourly Wage or 75% of Disposable Earnings 130 x Minimum Hourly Wage or 75% of Disposable Earnings
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1. Judgment Debtor's objection to the Garnishee's Calculation of the Amount of Exempt Earnings because I believe that the correct calculation is:

Gross Earnings for My Pay Period from _____ thru _____	\$ _____
Less Deductions Required by Law (For Example, Withholding Taxes, FICA)	- \$ _____
Disposable Earnings (Gross Earnings Less Deductions)	= \$ _____
Less Statutory Exemption (Use Exemption Chart on Writ)	- \$ _____
Net Amount Subject to Garnishment	= \$ _____
Less Wage/Income Assignment(s) During Pay Period (If Any)	- \$ _____
Amount which should be withheld	= \$ _____

OR

2. The earnings garnished are pension or retirement benefits/deferred compensation/health, accident or disability insurance and they are totally exempt because:

I understand that I must make a good faith effort to resolve my dispute with the Garnishee.

I **have** **have not** attempted to resolve this dispute with the Garnishee.

Name of Person I Talked to: _____

Position: _____ Phone Number: _____

Debtor's Notice to Garnishee: Even though I am filing this Objection, you are directed to send my nonexempt earnings to the Court at the address noted instead of to the party designated in paragraph "e" on the front of the Writ of Continuing Garnishment. The Court will hold my nonexempt earnings in its registry until my Objection is resolved.

I certify that the above is correct to the best of my knowledge and belief and that I sent a copy of this document by certified mail (return receipt requested) to both the Garnishee and to the Judgment Creditor, or if the Judgment Creditor is represented by Counsel, certified mail (return receipt requested) to the Judgment Creditor's Attorney or E-Service to the Judgment Creditor's Attorney.

- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.
 - By checking this box, I am acknowledging that I have made a change to the original content of this form.
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Garnishee
Address: _____

Judgment Creditor or Attorney
Address: _____

Signature of Judgment Debtor or
Judgment Debtor's Counsel and Reg. Number