SHORT TITLE:	LEVYING OFFICER FILE NO.	COURT CASE NO.

FINANCIAL STATEMENT

(Wage Garnishment—Enforcement of Judgment

NOTE: If you are married, this form must be signed by your spouse unless you and your spouse are living separate and apart. If this form is not signed by your spouse, check the applicable box on the reverse in item 9.

NAME	AGE	RELATIONSHIP TO ME	MONTHLY TAKE-HOME INCOME & SOURCE
a.		Spouse	
b.			
c.			
d.			
e.			
My monthly income			
a. My gross monthly pay is:			2a.\$
b. My payroll deductions are (specify purpose a	and amount):	
(1) Federal and state withh	olding, FICA, and	SDI \$	
(2)		\$	
(3)		\$	
(4)		\$	
		· · · · · · · · · · · · · · · · · · ·	
		(1) through (4)):	b. \$
My TOTAL payroll deductio c. My monthly take-home pay is	n amount is (add ((a minus b):	(1) through (4)):	
My TOTAL payroll deductio c. My monthly take-home pay is d. Other money I get each month	n amount is (add ((a minus b): I from (specify soo	(1) through (4)): urce): is	c. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM	n amount is (add ((a minus b): I from (specify soo	(1) through (4)):urce): is	c. \$d. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM	n amount is (add ((a minus b): I from (specify sou E (c plus d)	(1) through (4)):urce): is	c. \$d. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other deposits	n amount is (add ((a minus b): from (specify sou E (c plus d)	(1) through (4)):urce): is	c. \$d. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependent	n amount is (add ((a minus b): I from (specify sou E (c plus d) endents own the	following property:	c. \$ d. \$ e. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependance of the control of	n amount is (add ((a minus b): from (specify sou E (c plus d) endents own the sunion accounts (lis	following property: t banks): \$	c. \$ d. \$ e. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependence of the company of	n amount is (add ((a minus b): I from (specify sou E (c plus d) endents own the sound accounts (lis	following property: t banks): \$\$	c. \$ d. \$ e. \$ 3a. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependance are cash	n amount is (add ((a minus b): I from (specify sou E (c plus d) Endents own the sound accounts (lis	following property: t banks): \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	c. \$ d. \$ e. \$ 3a. \$
e. TOTAL MONTHLY INCOM I, my spouse, and my other deperation of the company of t	n amount is (add ((a minus b): I from (specify sou E (c plus d) Endents own the sound accounts (lis	following property: t banks): \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	c. \$ d. \$ e. \$ 3a. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependance of the company of	n amount is (add ((a minus b): I from (specify sou E (c plus d) Endents own the sound accounts (lis	following property: t banks): \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	c. \$ d. \$ e. \$ 3a. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependance as Cash	n amount is (add (a minus b):	following property: t banks: \$ year of each: \$ \$	c. \$
My TOTAL payroll deduction c. My monthly take-home pay is d. Other money I get each month e. TOTAL MONTHLY INCOM I, my spouse, and my other dependant of the company of t	n amount is (add ((a minus b): I from (specify solution E (c plus d) Endents own the sum of	following property: t banks): \$ \$ year of each): \$ \$ \$	c. \$c. \$

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1. The monthly expenses for me, my energy and my other dependents		
The monthly expenses for me, my spouse, and my other dependents a. Rent or house payment and maintenance	4 2 \$	
b. Food and household supplies		
c. Utilities and telephone		
d. Clothing	_	
e. Medical and dental payments		
f. Insurance (life, health, accident, etc.)		
g. School, child care		
h. Child, spousal support (prior marriage)		
I. Transportation & auto expenses (insurance, gas, repair) (list car payments		
j. Installment payments (insert total and itemize below in item 5)		_
k. Laundry and cleaning		
I. Entertainment	I. \$	
m. Other (specify):		
	m. \$	
n. TOTAL MONTHLY EXPENSES (add a through m):	n. \$	
 Other facts which support this Claim of Exemption (i.e., unusual medical needs emergencies, or other unusual expenses to help your creditor and the judge un needed, attach page labeled Attachment 6.) 		
7. An earnings withholding order is now in effect with respect to my earning item 1 (specify each person's name and monthly amount):	gs or those of my spouse or de	pendents named in
8. A wage assignment for support is now in effect with respect to my earn item 1 (specify each person's name and monthly amount):	ings or those of my spouse or d	ependents named in
9. My spouse has signed below.		
☐ I have no spouse.		
My spouse and I are living separate and apart.		
I declare under penalty of perjury under the laws of the State of California that the	foregoing is true and correct.	
Date:		
(TVDE OD DDINT NAME)		
(TYPE OR PRINT NAME)	(SIGNATURE)	
(TYPE OR PRINT NAME OF SPOUSE)	(SIGNATURE OF SPOUS	

(SIGNATURE OF SPOUSE)