STATE OF WISCONSIN, CIRCUIT COURT, [COUNTY OF FILING] COUNTY

Creditor: YOUR CLIENT

Debtor: THE PERSON YOU SUED

and

Garnishee(s): THAT PERSON'S EMPLOYER

Earnings Garnishment Notice

Case No. ORIGINAL CASE

To the Clerk of Court:

The creditor has commenced an earnings garnishment action against the debtor and the garnishee to collect the following unsatisfied civil judgment:

Name of Debtor(s)		County of Original Judgment
THE PERSON YOU SUED		COUNTY OF FILING
Original Case Number ORIGINAL CASE NO	Date of Original Judgment DATE YOU DOCKETED JUDGMENT	Amount of Original Judgment AMOUNT YOU WON
Transcript of Judgment filed in This County on: DATE YOU FILED TRANSCRIPT	Case Number of Transcript TRANSCRIPT CASE NO	Amount of Judgment Unpaid, including statutory interests and costs $ UNPAID as of [Date] DATE OF FILING THIS .

☐ This is a garnishment action to satisfy an order for victim restitution under §973.20(1r), Wis. Stats., and there is no filing fee.

Name of Debtor being garnished:

Name
THE PERSON YOU SUED
Address
THAT PERSON'S FULL ADDRESS INCLUDING CITY, STATE, & ZIP

Garnishee:

Name
THAT PERSON'S EMPLOYER
Address
EMPLOYER'S FULL ADDRESS INCLUDING CITY, STATE, & ZIP

☐ See attached for multiple garnishees

Creditor:

Name
YOUR CLIENT
Phone Number
CLIENT PHONE
Address
CLIENT'S FULL ADDRESS INCLUDING CITY, STATE, & ZIP

Creditor's Attorney:

Name
YOUR NAME
Phone Number
YOUR PHONE
Address
YOUR OFFICE ADDRESS
State Bar Number
YOUR SBN

▶ SIGNATURE OF WHO IS SIGNING
Creditor's or Creditor's Attorney's Signature

CLIENT/YOUR NAME
Name Printed or Typed

CORRESPONDING ADDRESS
Address

CORRESPONDING EMAIL — CORRESPONDING PHONE
Email Address — Telephone Number

DATE SIGNING — IF APPLICABLE
Date — State Bar No. (if any)