

Mark this box if this form contains Restricted Information.



CIRCUIT COURT FOR _____, MARYLAND

Located at _____ City/County Telephone _____

_____ Court Address _____

Case No. _____

Plaintiff/Judgment Creditor _____ vs. Defendant/Judgment Debtor _____

Address _____ Address _____

City, State, Zip _____ Telephone _____ City, State, Zip _____ Telephone _____

Plaintiff/Judgment Creditor Attorney _____

Address _____

City, State, Zip _____ Telephone _____

SERVE ON: _____ Serve by Sheriff/Constable

Garnishee/Employer _____ Serve by Restricted Delivery Mail

_____ Serve by Private Process

Street Address _____

City, State, Zip _____

REQUEST FOR WRIT OF GARNISHMENT OF WAGES (Md. Rule 2-646)

If this submission contains Restricted Information (confidential by statute, rule, or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.

PLEASE ISSUE A WRIT OF GARNISHMENT on the judgment in the above-referenced case to be directed to the garnishee/employer named above. Judgment was by confession. A judgment was entered in this case on

_____, _____, _____
Month/Day Year

THE AMOUNT DUE on the judgment is as follows:

\$ _____ Original amount of judgment principal (excluding costs, interest, and attorney's fees)

\$ _____ Plus pre-judgment interest on \$ _____ at _____ % for the time period from _____, _____ to _____, _____
Month/Day Year Month/Day Year

\$ _____ Plus court costs due, including this writ

\$ _____ Plus additional costs/fees awarded

\$ _____ Plus post-judgment interest on \$ _____ at the contractual rate of _____ % for the time period from _____, _____ to _____, _____
Month/Day Year Month/Day Year

and/or at the legal rate of _____ % for the time period

from _____, _____ to _____, _____
Month/Day Year Month/Day Year

\$ _____ Plus attorney's fees awarded by the court

\$ _____ Less total post-judgment credits

\$ _____ **TOTAL DUE ON JUDGMENT**

Date

Signature of Plaintiff/Judgment Creditor/Attorney Attorney Number

Telephone Number Fax

Printed Name

E-mail

Street Address

City, State, Zip