JUDGMENT DEBTOR(S)'S MOTION FOR RETURN/RELEASE OF WAGES FROM GARNISHMENT; NOTICE OF HEARING; CERTIFICATE OF SERVICE; GARNISHMENT CALCULATION WORKSHEET; EXHIBIT "A"

In The District Court of the Second Circuit Division			
STATE OF HAWAI'I			
Plaintiff(s)			
		Reserved for Court Use	
		Civil No.	
Defendant(s)		Filing Party(ies)/Filing Party(ies)' Attorney (Name, Attorney Number, Firm Name (if applicable), Address, Telephone and Facsimile Numbers)	
JUDGMENT DEBTOR(S)'S MOTION			
FOR RETURN/RELEASE OF WAGES EXEMPT FROM GARNISHMENT			
Filing Party(ies) moves this Court for an Order returning or releasing to the filing party all or a portion of wages which have been garnished because:			
1. □ The amount garnis	hed or withheld was excessive as the	☐ Federal Law ☐ State Law was more favorable to the filing party.	
2. ☐ The Garnishee should have deducted \$, rather than \$ according to the Garnishment Calculation Worksheet, Form# DC27C, and a copy of applicable pay stub attached as Exhibit "A".			
3. Other (specify)			
3. — Other (speeny)			
Signature of Judgment Debtor(s)'/Declarant:			
Date:	Print/Type Name:		
	NOTICE	A NEW A DAVIG	
NOTICE OF HEARING			
TO:			
Please take notice that this Motion will be heard before the Presiding Judge of this Court in his/her Courtroom, at the address on the			
next page ona.m. or as soon thereafter as parties may be heard.			

	COURT ADI	DRESS(ES):		
 []Wailuku Division (Regular []Wailuku Division (Small Cl []Lahaina Division []Hana Division []Moloka'i Division []Lana'i Division 	aims) 2145 Main Stree 1870 Honoapi'il 4974 Uakea Roa 55 Makaena Plac	2145 Main Street, Courtroom 3C, Third Floor, Wailuku, HI 96793 2145 Main Street, Courtroom 3D, Third Floor, Wailuku, HI 96793 1870 Honoapi'ilani Highway, Lahaina, HI 96761 4974 Uakea Road, Hana, HI 96713 55 Makaena Place, Kaunakakai, Moloka'i, HI 96748 312 8th Street, Lana'i City, Lana'i, HI 96793		
Mailing address for the above	Courts: 2145 Main Stre	eet, Rm. 106, Wailuku, HI 96793		
	CERTIFICATE	OF SERVICE		
		ress(es) of the Opposing Party(ies) or Opposing Party(ies)' attorney		
		or \square Mail, at the following address(ies):		
Judgment Creditor: Employer/Garn		Employer/Garnishee		
	To			
Signature of Filing Party(ies)/Filing Party(ies)' Attorney:		ing Party(ies)' Attorney:		
Date:	Print/Type Name:			
RESPONSE TO MOTION/CERTIFICATE OF SERVICE				
☐ I DO NOT OBJECT to this Motion.				
☐ I DISAGREE with this Mot	tion for the following reasons:			
(Attache continuation page	•			
I have read this Response, know the contents and verify that the statements are true to my personal knowledge and belief. I DECLARE UNDER PENALTY OF PERJURY THAT THE FOLLOWING IS TRUE AND CORRECT.				
CERTIFICATE OF SERVICE				
I certify that a copy of this Motion	n was served at the last known add	ress(es) of the Opposing Party(ies) or Opposing Party(ies)' attorney		
on (date) by \square Hand-delivery or \square Mail at the following address(ies):				
Judgment Creditor: Employer/Garnishee				
5	ignature of Respondent Party(ies)/Responding Party(ies)/ Attorney:			
Date:	rint/Type Name			

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In accordance with the Americans with Disabilities Act if you require an accommodation for your disability, please contact the District Court Administration Office at PHONE NO. 244-2800, FAX 244-2849, or email adarequest@courts.hawaii.gov at least ten (10) working days in advance of your hearing or appointment date. For all civil matters, please call 244-2706 or visit the Service Center at 2145 Main Street, Room 141, Wailuku, HI 96793.