Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE	
FOR THE STATE OF IDAHO, IN AND FOR	Case No WRIT OF CONTINUING
Plaintiff(s), vs.	GARNISHMENT
Defendant(s).	
THE STATE OF IDAHO to the Sheriff of the County of	
THE STATE OF IDAHO to (employer)	
On (date), (your n	
recovered a judgment against the Defendant(s) in this case for:	
TOTAL SUM OF JUDGMENT:\$Amount(s) paid by Defendant(s):\$Plus accruing costs:\$Plus accrued interest:\$	
Total amount now due a	and owing: \$
You, THE SHERIFF, are required to satist	fy the judgment, with post-judgment interest
accruing at the legal rate and accruing costs,	out of the personal property of (name of
defendant)	and make return of this writ
within ninety (90) days after receipt of this write	t.

You, THE EMPLOYER of the judgment debtor, are hereby directed to pay the Sheriff of _____ County such future moneys coming due to (name of defendant) ____ as a result of his/her employment with you, pursuant to Section 11-704, Idaho Code. This garnishment shall continue until the judgment, including post-judgment interest and accruing costs, has been fully paid.

YOU ARE HEREBY NOTIFIED THAT IF YOU FAIL TO COMPLY with the terms of this writ, that you, the employer, may be held responsible for payment of such sums that you are required by this writ to withhold from the wages of the judgment debtor. YOU ARE FURTHER NOTIFIED that if you are paying over to the sheriff, pursuant to this writ, from the compensation of the judgment debtor, the maximum amount allowed under the provision of section 11-207, Idaho Code, then no other garnishments may be served upon you until this garnishment is satisfied.

Date:

CLERK OF THE DISTRICT COURT

By: _____ Deputy