Doc	ket Page	_ Date of Judgment		Amount of Judgment		
		PLEASE COMPL	ETE FORM	\$		
		SUGGESTION I	FOR GARNISHM	ENT		
STATE OF MISSISSIPPI HINDS COUNTY		\$	Suit Filed About			
		1	Amount Prin. & Int. Owing Earned Court Cost Unpaid		S	
]			\$	
		•	Court Cost This G	arnishment	\$	
		ŗ	Fotal Demand		\$	
To	To					
is in	debted to the defendant, or indebted, or who has effective of Garnishment against to	has property of the dets or property of the de	efendant in his hand	s, or knows of nds; therefore,	I suggest the issuance of	
				Р	laintiff	
]	BY			
	nishment payment is to be s	sent to:				
	Plaintiff					
	Defendant					
	Attorney of Record Address					