

STATE OF INDIANA )  
 ) SS:  
COUNTY OF ELKHART )

ELKHART SUPERIOR COURT 5  
1905 RELIANCE ROAD  
GOSHEN, IN 46526

CAUSE NO: 20D05-\_\_\_\_\_

\_\_\_\_\_  
Plaintiff

VS.

\_\_\_\_\_  
Defendant

\_\_\_\_\_  
Garnishee-Defendant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

**INTERROGATORIES TO GARNISHEE-DEFENDANT**

MEETING DATE: \_\_\_\_\_

1. State the correct name, address and telephone number of your company or partnership.  
\_\_\_\_\_

2. Does the above Defendant receive periodic earnings or compensation from you as an employee or independent contractor? (Earnings of independent contractors and 1099 employees are subject to garnishment orders under Indiana law.) \_\_\_ YES \_\_\_ NO TERMINATED AS OF \_\_\_\_\_ (date)

3. If employed, what is the date of hire? \_\_\_\_\_ Is Defendant on any type of leave? If so, please describe the circumstances and the duration. \_\_\_\_\_

4. State the average weekly gross amount paid to the Defendant. \_\_\_\_\_

5. Defendant's last known address and last 4 of the SS number.  
\_\_\_\_\_

6. Does the Defendant have any garnishment orders in effect currently? If so, state the cause number(s) and the amount(s).  
\_\_\_\_\_

7. Does the Defendant own any interest in your company or are there any debts due to this individual from your company? \_\_\_\_\_

**I AFFIRM UNDER PENALTIES FOR PERJURY THAT THE FOREGOING REPRESENTATIONS ARE TRUE.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

**Return Interrogatories to:**  
Plaintiff's Counsel at

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone number