

WARNING: IF YOU CLAIM AN EXEMPTION IN BAD FAITH, OR IF THE JUDGMENT CREDITOR WRONGLY OBJECTS TO AN EXEMPTION IN BAD FAITH, THE COURT MAY ORDER THE PERSON WHO ACTED IN BAD FAITH TO PAY COSTS, ACTUAL DAMAGES, ATTORNEY FEES, AND AN EXTRA \$100.

1. JUDGMENT DEBTOR Name		2. ☐ Individual ☐ Partnership ☐ Corporation ☐ Other _____	
3. Street Address	4. City	5. State	6. Zip
7. Date of Birth	8. If Married, Spouse's Full Name		9. Home Telephone Number ()
10. Employer or Business		11. Work Telephone Number ()	
12. Street Address	13. City	14. State	15. Zip
16. What are your total wages, salary, or commissions per pay period? \$		17. How often are you paid? ☐ Daily ☐ Weekly ☐ Twice a Month ☐ Monthly Other _____	
18. Do you have income from any other source? ☐ Yes ☐ No If yes, give the source and amount of the income: _____			
19. By answering this question, you will be able to claim the exemptions you have for wages and income. The first exemption is already checked for you, check all others that apply: ☒ I claim that 75% of my disposable (after-tax) earnings or 40 times the federal minimum wage (now equals \$290 for 40-hour week) is exempt (whichever is greater), unless the judgment is for child support. ☐ If the Judgment is for child support, I claim that the following percentage of my after-tax earnings is exempt: ☐ 50% (I am supporting a spouse and/or dependent child, and the child support judgment is 12 weeks old or less.) ☐ 55% (I am supporting a spouse and/or dependent child, and the child support judgment is more than 12 weeks old.) ☐ 60% (I am not supporting a spouse and/or dependent child, and the child support judgment is 12 weeks old or less.) ☐ 65% (I am not supporting a spouse and/or dependent child, and the child support judgment is more than 12 weeks old.) ☐ I am presently receiving or have received relief based on need in the past 6 months so all my wages are exempt. Type of relief you receive _____ ☐ I have been an inmate in a correctional institution within the past 6 months so all my wages are exempt. Name institution and release date _____ ☐ My income is exempt because it is: ☐ Unemployment Comp. ☐ Worker's Comp. ☐ V.A. Benefits ☐ Social Security ☐ Accident or Disability Benefits ☐ Retirement Benefits ☐ Other (Specify) _____			
20. Do you have a checking or savings account? (This includes any account whether you have it by yourself or with someone else, or whether it is in your name or any other name) ☐ Yes ☐ No For each, provide the following information:			
Name and address of bank, Credit Union or Financial Institution		Type of Account	Account Number
21. If you claimed an exemption for your wages or income, you may claim an exemption when your money is deposited in a bank. Claim your exemptions by checking the boxes that apply to you:			
☐ The money in my account is from exempt wages, income, or benefits.			
☐ The money in my account is from the exempt sale of my homestead within the past year.			
☐ The money in my account is from exempt life insurance received on the death of a spouse or parent.			
☐ The money in my account is from other exempt property (specify) _____			
22. Do you have any stocks, bonds, securities, certificates of deposit, mutual funds, money market account, etc.? (This includes any whether owned by you alone or with any other person, or whether it is in your name or any other name.			
☐ Yes ☐ No If yes, itemize these and the location of each. _____			

23. Do you own your home? ☐ Yes ☐ No Your homestead (house owned and occupied by you) is exempt up to a Value of \$390,000 or if used primarily for agricultural purposes, \$975,000. Do you own any other houses, land, or real estate?
☐ Yes ☐ No For each, give the following:

Location	Estimated Value	Amount Owed (if any)	To Whom
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24. Do you own any motor vehicles, motorcycles, boats, snowmobiles, trailers, etc.? ☐ Yes ☐ No
For each, provide the following:

Make	Model	Year	Lic. Plate No.	Market Value	Amount You Owe (if any)
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One motor vehicle worth up to \$4,600 (or \$46,000 if the vehicle has been modified at a cost of at least \$3,450 to accommodate a physical disability making a disabled person eligible for a parking permit under Minn. Stat. § 169.345) after subtracting what you owe is exempt. Which vehicle do you want to claim as exempt?

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25. Do you own any of the follow property?

Cash or travelers checks	☐ Yes ☐ No	Farm supplies, implements, livestock, grain worth more than \$13,000	☐ Yes ☐ No
Household goods, furnishings, and personal effects that are worth more than \$10,350 total	☐ Yes ☐ No	Business equipment, tools, machinery worth more than \$11,500 total	☐ Yes ☐ No
Jewelry	☐ Yes ☐ No	Inventory	☐ Yes ☐ No
Coins or stamp collections	☐ Yes ☐ No	Accounts receivable/claims	☐ Yes ☐ No
Firearms/Guns	☐ Yes ☐ No	Are you the owner or partner in any business not already listed	☐ Yes ☐ No
Life insurance policy with a cash (surrender) value more than \$9,200	☐ Yes ☐ No	Any other property (specify) _____	☐ Yes ☐ No
Any property that you are selling on a contract for deed	☐ Yes ☐ No		

If you answered yes to any item in question 25, provide the following information:

Description and location of property (if not at residence)	Estimated Value	Amount Owed (if any)	To Whom
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If you need additional space to answer the questions, continue your answers here. Indicate the question number you are answering. Attach additional sheets if necessary.

The above information is true and correct to the best of my knowledge.

Date: _____ Signature: _____

NOTICE: FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM TO THE JUDGMENT CREDITOR WITHIN 10 DAYS MAY RESULT IN A CITATION FOR CIVIL CONTEMPT OF COURT.