

NOTICE TO THE EMPLOYER/GARNISHEE

**You have been provided
with two (2) sets of the
attached documents.
Upon receipt, please provide
one (1) set to the employee
whose wages are being
garnished.**

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.

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