

**JUDGMENT DEBTOR'S MOTION FOR RETURN/RELEASE  
OF WAGES EXEMPT FROM GARNISHMENT;  
NOTICE OF MOTION; CERTIFICATE OF SERVICE;  
GARNISHMENT CALCULATION WORKSHEET; EXHIBIT "A"**

TWO-SIDED FORM  
Form # 1DC27B

<b>IN THE DISTRICT COURT OF THE FIRST CIRCUIT</b> _____ <b>DIVISION</b> <b>STATE OF HAWAII</b>	
Plaintiff	Reserved for Court Use
Defendant	Civil No.
	Filing Party/Attorney Name, Attorney Number, Firm Name (if applicable), Address, Telephone Number and Email

**JUDGMENT DEBTOR'S MOTION**

**FOR RETURN/RELEASE OF WAGES EXEMPT FROM GARNISHMENT**

Filing Party moves this Court for an Order returning or releasing to the filing party all or a portion of wages which have been garnished because:

1.  The amount garnished or withheld was excessive as the  Federal Law  State Law was more favorable to the filing party.
2.  The Garnishee should have deducted \$ \_\_\_\_\_, rather than \$ \_\_\_\_\_ according to the Garnishment Calculation Worksheet, Form# DC27C, and a copy of applicable pay stub attached as Exhibit "A".
3.  Other (specify) \_\_\_\_\_.

Date:	Signature of Declarant:
	Print/Type Name:

**NOTICE OF HEARING**

TO: \_\_\_\_\_:

Please take notice that this Motion will be heard before the Presiding Judge of this Court in the Courtroom, at the address checked on page 2 on \_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ a.m. or as soon thereafter as parties may be heard.

(continued on reverse side)

**SEE AND USE PAGE 2 TO RESPOND TO MOTION**

**COURT ADDRESS(ES):**

- Honolulu Division,
- 'Ewa Division,
- Ko'olaupoko OR Ko'olaupoko Division
- Wahiawā OR Wai'alua Division
- Wai'anae Division

1111 Alakea Street, 10th Floor, Honolulu, Hawai'i  
 870 Fourth Street, Pearl City, Hawai'i  
 45-939 Po'okela Street, Kāne'ohe, Hawai'i  
 1034 Kilani Avenue, Hawai'i  
 4675 Kapolei Parkway, Hawai'i

Mailing address for the above Courts: **1111 Alakea Street, Civil Division, Third Floor, Honolulu, Hawai'i 96813**

**CERTIFICATE OF SERVICE**

I certify that on (date): \_\_\_\_\_ I served a copy of this Motion on all parties or their attorneys by  Hand-delivery or  Mail, addressed as follows:  
 Judgment Creditor: \_\_\_\_\_ Employer/Garnishee

Signature of Filing Party/Attorney:

Date:

Print/Type Name:

**RESPONSE TO MOTION/CERTIFICATE OF SERVICE**

- I DO NOT OBJECT to this Motion.
- I DISAGREE with this Motion for the following reasons:

Reserved for Court Use

I have read this Motion, know the contents and verify that the statements are true to my personal knowledge and belief. **I DECLARE UNDER PENALTY OF PERJURY THAT THE FOLLOWING IS TRUE AND CORRECT:**

**CERTIFICATE OF SERVICE**

I certify that on (date): \_\_\_\_\_ I served a copy of this Response to the Motion on all parties or their attorneys by  Hand-delivery or  Mail, addressed as follows:  
 Judgment Creditor: \_\_\_\_\_ Employer/Garnishee

Date:

Signature of Responding Party/Attorney:

Print/Type Name:

**Americans with Disabilities Act Notice**



If you need an accommodation for a disability when participating in a court program, service or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

- Call (808) 538-5121; or
- Send an email to [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov)

The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.

For Civil related matters, please call (808) 538-5629 or visit the District Court Service Center at 1111 Alakea Street, Third (3<sup>rd</sup>) Floor, Honolulu, Hawai'i 96813.