ONTARIO

(Name of Court)

Court file number

Form 29F: Dispute (garnishee)

at _____
Court office address

Recipient(s)

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).	*Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).*

Payor

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).	*Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).*

Garnishee

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).	*Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).*

1. I am the garnishee in this garnishment case.

2. I am not legally required to pay ☐ the amounts set out in the notice of garnishment issued on *(date)* _____

☐ the changed amounts set out in the statutory declaration of indexed support made on *(date)* _____,

for the following reason(s):

☐ I do not owe and do not expect to owe any money to the payor because:

- ☐ the payor has never worked for me.
- ☐ the payor stopped working for me on *(date)* _____
- ☐ I owed the payor money and paid it in full by *(date)* _____
- ☐ I do not hold any money in trust for or to the credit of the payor.
- ☐ *(Other;specify.)*

Court file number

☐ I owe or will owe money to the payor, but it cannot be seized by garnishment because *(State reasons for legal exemption.)*

☐ *(Other grounds; specify.)*

Put a line through any blank space left on this page.

NOTE: *Merely serving and filling this dispute will not stop the garnishment process. It can be stopped at the recipient's request if the recipient agrees with the reasons for your dispute. It can also be stopped by a court order at a garnishment hearing. If you want the court to hold a hearing, you must check the box in the frame below.*

☐ **NOTICE TO THE CLERK OF THE COURT AND TO ALL PARTIES:** I am making a request for a garnishment hearing in which the court can rule on this dispute.

Signature of garnishee

Date of signature

NOTICE TO RECIPIENT: Please examine this dispute. If you disagree with it and if the payer has not asked for a garnishment hearing, you yourself may ask to have a court hearing. You may want to talk to your own lawyer about this. You have 10 days from the date of being served with this document to decide whether to have a court hearing. If you want a hearing, you or your lawyer have 10 days within which to ask the clerk of the court, either in person or in writing, to mail out to you, to the payor, to the garnishee and to the co-owner of a joint debt (if any) a notice of garnishment hearing (Form 29H). At that hearing, the judge will give you and the other parties a chance to be heard and may make an order that can affect the rights of all parties.