



2701 First Avenue, Suite 500, Seattle, WA 98121  
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**I authorize LT Services to commence collection proceedings regarding the named debtor:**

From Client/Company: \_\_\_\_\_  
Primary Contact/Your Name: Mr. / Ms. \_\_\_\_\_  
Your E-Mail or Fax: \_\_\_\_\_  
Your Phone Number: \_\_\_\_\_  
Contact/Billing Address: \_\_\_\_\_  
(provide two if different) \_\_\_\_\_

Debtor's Name(s): \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_  
\_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_  
\_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Identify or attached judgment: Cause No.: \_\_\_\_\_ County: \_\_\_\_\_  
Balance due: \$ \_\_\_\_\_ Payments made: \$ \_\_\_\_\_

**Wage Garnishments:**

Employer: \_\_\_\_\_  
Employer's address: \_\_\_\_\_  
\_\_\_\_\_

Please attach any verifying information you have such as a pay stub or screening application/report

**Bank Garnishments:**

Bank: \_\_\_\_\_  
Account Number(s): \_\_\_\_\_

Please attach any verifying information you have such as a canceled check or screening application/report

**Subpoena employment records:**

Note: A full social security number is required for each debtor to obtain a subpoena for his or her employment records.

**Record my judgment:**

County/Countries: \_\_\_\_\_

We recommend recording any judgment you intend to collect. Recording crease a lien on the debtor's homestead (usually primary residence) in the county where it is recorded. You may record the judgment in multiple counties.

By submitting this form, I certify that I am authorized to act on behalf of the judgment creditor, have received a copy of the current rate sheet and collection policies, agree to the collection policies, and agree to pay all charges using the payment method provided or already on file.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_