|  |  |
| --- | --- |
| *ONTARIO* |  |
| **Superior Court of Justice** | Notice of Garnishment Hearing |
|  | Form 20Q Ont. Reg. No*.* 258/98 |
|  |       |  |       |
| Small Claims Court |  | Claim No. |
|       |  |       |
| Garnishment No. |
| Address |  |
|       |  |
|  | Phone number |  |  |
| **Creditor** | **[ ]**  | Additional creditor(s) listed on the attached Form 1A. |
| Last name, or name of company |
|       |
| First name | Second name | Also known as |
|       |       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| Representative | Law Society of Ontario no. |
|       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| **Debtor** |
| Last name, or name of company |
|       |
| First name | Second name | Also known as |
|       |       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| Representative | Law Society of Ontario no. |
|       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
|  |
| **NOTE:** | The Notice of Garnishment Hearing must be served by the person requesting the hearing on the creditor, debtor, garnishee, co-owner of debt, if any, and any other interested person [R. 8.01(9)]. |
| Les formules des tribunaux sont affichées en anglais et en français sur le site [www.ontariocourtforms.on.ca](http://www.ontariocourtforms.on.ca/). Visitez ce site pour des renseignements sur des formats accessibles. |

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| **FORM 20Q** | **PAGE 2** |   |
|  |  | Claim No. |
|  |  |   |
|  |  | Garnishment No. |
| **Garnishee** |
| Last name, or name of company |
|       |
| First name | Second name | Also known as |
|       |       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| Representative | Law Society of Ontario no. |
|       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| Co-Owner of Debt (if any) | [ ]  | Additional co-owner(s) listed on attached Form 1A. |
| Last name, or name of company |
|       |
| First name | Second name | Also known as |
|       |       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| Representative | Law Society of Ontario no. |
|       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |
| Other Interested Person (if any) | [ ]  | Additional interested person(s) listed on attached Form 1A. |
| Last name, or name of company |
|       |
| First name | Second name | Also known as |
|       |       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address |
|       |       |
| Representative | Law Society of Ontario no. |
|       |       |
| Address (street number, apt., unit) |
|       |
| City/Town | Province | Phone no. |
|       |       |       |
| Postal code | Email address      |
|       |

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| **FORM 20Q** | **PAGE 3** |   |
|  |  | Claim No. |
|  |  |   |
|  |  | Garnishment No. |
| **TO THE PARTIES:**  |
| (The person requesting this garnishment hearing or the person’s representative must contact the clerk of the court to choose a time and date when the court could hold this garnishment hearing.) |
| **THIS COURT WILL HOLD A GARNISHMENT HEARING on** |       | **, 20** |    | **, at** |
|       | **, or as soon as possible after that time** |
| (Time) |  |
| [ ]  | by videoconference |
| [ ]  | in person |
| **at** |       |
|  | (Videoconference details or address of court location and courtroom number, as applicable) |
| because *(Check the appropriate box.)* |
| [ ]  | the creditor | [ ]  | the debtor | [ ]  | the garnishee | [ ]  | the co-owner of debt |
| [ ]  | other interested person: |       |
|  |  | (Specify) |
| states the following: | *(In numbered paragraphs, provide details of your dispute and the order(s) requested.)* |
|       |
| [ ]  | **Additional pages are attached because more space was needed.** |
|       | , 20 |    |  |  |
|  |  |  |  | (Signature of party or representative) |
|  |
| **NOTE:** | **If you fail to attend this garnishment hearing, an order may be made in your absence and enforced against you.** |