

Claim of Exemption Bank Levy



**LEGAL AID
FOUNDATION
OF LOS ANGELES**

Forms

Self-Help Legal Access Centers

Santa Monica	Inglewood	Torrance	Long Beach
1725 Main St., Room 210 Santa Monica, CA 90401	1 East Regent St., Room 107 Inglewood, CA 90301	825 Maple Ave., Room 160 Torrance, CA 90503	275 Magnolia Ave., Room 3101 Long Beach, CA 90802

January 2026

This guide is designed to help you fill out the forms yourself. It is not intended to provide legal advice nor strategy as to how to complete the case. The information provided in this packet only presents options and examples. This is not a substitute for professional legal advice from an attorney.

**[NOT FOR WAGE GARNISHMENT]
RETURN TO LEVYING OFFICER. DO NOT FILE WITH COURT**

EJ-160

ATTORNEY OR PARTY WITHOUT ATTORNEY: _____ STATE BAR NO.: _____ NAME: _____ FIRM NAME: _____ STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____ TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (<i>name</i>): Self-Represented	<p align="center"><i>FOR LEVYING OFFICER USE ONLY (Levying Officer Name and Address)</i></p>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PLAINTIFF/PETITIONER: _____ DEFENDANT/RESPONDENT: _____	LEVYING OFFICER FILE NUMBER: _____
<p>CLAIM OF EXEMPTION (Enforcement of Judgment)</p>	
Instructions for completing this form: <ul style="list-style-type: none"> • Read <i>Exemptions from the Enforcement of Judgments</i> (form EJ-155) and <i>Current Dollar Amounts of Exemptions from Enforcement of Judgments</i> (form EJ-156) to help you figure out whether your property is exempt. • If you check the box for item 4, you must attach a completed <i>Financial Statement</i> (form EJ-165) to this <i>Claim of Exemption</i>. You can get a copy of form EJ-165 for free by asking the levying officer or going to courts.ca.gov/rules-forms/find-your-court-forms or your court's self-help center. • You must give the levying officer this original completed form and one copy of the completed form. You should save at least one copy of the form for your records. Do not file this form with the court. 	
CASE NUMBER: _____	

1. My name is:
2. Papers should be sent to:
 - me.
 - my attorney (I have filed with the court and served on the judgment creditor a request to have papers sent to my attorney, and my attorney has consented in writing to receive these papers.)
 - at the address shown above another address (*specify*):
3. I am not the judgment debtor named in the notice of levy. The name and last known address of the judgment debtor is (*specify*):
4. Some or all of my property is exempt because it is needed to support me and my spouse and dependents. A completed *Financial Statement* (form EJ-165) is attached to this claim. (*As used in this form, "spouse" includes a registered domestic partner. (Code Civ. Proc., § 17(b)(12).)*)
5. Some or all of my property is exempt without making a claim of exemption. That property is (*describe; if more space is needed, check here* *and attach a page labeled Attachment 5*):

SHORT TITLE:	LEVYING OFFICER FILE NO.	COURT CASE NO.
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6. The property I claim to be exempt is (describe; if more space is needed, check here and attach a page labeled Attachment 6):

7. My property is exempt under the following laws (specify code and section, for example "Code of Civil Procedure section 703.140(b)"; if more space is needed, check here and attach a page labeled Attachment 7):

8. The facts supporting my claim of exemption are (describe; if more space is needed, check here and attach a page labeled Attachment 8):

9. The property I claim to be exempt is (if more space is needed to complete any of the lettered subdivisions below, check here and attach a page labeled Attachment 9, and label the information on the attachment with the relevant subdivision letter):

a. a motor vehicle, the proceeds of an execution sale of a motor vehicle, or the proceeds of insurance or other indemnification for the loss, damage, or destruction of a motor vehicle. I own other property of the same type, either alone or with other people, and that property is (describe):

b. tools, implements, materials, uniforms, furnishings, books, equipment, a commercial motor vehicle, a vessel, or other personal property used in the trade, business, or profession of the judgment debtor or spouse. I own other property of the same type, either alone or with other people, and that property is (describe):

c. the loan value of unmaturred life insurance policies (including endowment and annuity policies) or benefits from matured life insurance policies (including endowment and annuity policies). My spouse or I own, either alone or with other people, other property of the same type, and that property is (describe):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

(TYPE OR PRINT NAME)



(SIGNATURE)

SHORT TITLE:	LEVYING OFFICER FILE NO.:	COURT CASE NO.:
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FINANCIAL STATEMENT
(Wage Garnishment - Enforcement of Judgment)

NOTE: If you are married, this form must be signed by your spouse unless you and your spouse are living separate and apart. If this form is not signed by your spouse, check the applicable box on the reverse in item 9.

1. The following persons other than myself depend, in whole or in part, on me or my spouse for support:

**MONTHLY TAKE-HOME
INCOME & SOURCE**

	NAME	AGE	RELATIONSHIP TO ME	
a.			Spouse	
b.				
c.				
d.				
e.				

2. My monthly income

a. My gross monthly pay is:	2a. \$ _____
b. My payroll deductions are (<i>specify purpose and amount</i>):	
(1) Federal and state withholding, FICA, and SDI	\$ _____
(2) _____	\$ _____
(3) _____	\$ _____
(4) _____	\$ _____
My TOTAL payroll deduction amount is (<i>add (1) through (4)</i>):	b. \$ _____
c. My monthly take-home pay is (<i>a minus b</i>):	c. \$ _____
d. Other money I get each month from (<i>specify source</i>): _____ is	d. \$ _____

e. TOTAL MONTHLY INCOME (<i>c plus d</i>)	e. \$ _____
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3. I, my spouse, and my other dependents own the following property:

a. Cash	3a. \$ _____
b. Checking, savings, and credit union accounts (<i>list banks</i>):	
(1) _____	\$ _____
(2) _____	\$ _____
(3) _____	\$ _____
c. Cars, other vehicles, and boat equity (<i>list make, year of each</i>):	
(1) _____	\$ _____
(2) _____	\$ _____
(3) _____	\$ _____
d. Real estate equity	d. \$ _____
e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.) (<i>list separately</i>):	
	e. \$ _____

SHORT TITLE:	LEVYING OFFICER FILE NO.:	COURT CASE NO.:
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4. The monthly expenses for me, my spouse, and my other dependants

- a. Rent or house payment and maintenance 4a. \$ _____
- b. Food and household supplies b. \$ _____
- c. Utilities and telephone c. \$ _____
- d. Clothing d. \$ _____
- e. Medical and dental payments e. \$ _____
- f. Insurance (life, health, accident, etc.) f. \$ _____
- g. School, child care g. \$ _____
- h. Child, spousal support (prior marriage) h. \$ _____
- i. Transportation & auto expenses (insurance, gas, repair) (list car payments in item 5) i. \$ _____
- j. Installment payments (insert total and itemize below in item 5) j. \$ _____
- k. Laundry and cleaning k. \$ _____
- l. Entertainment l. \$ _____
- m. Other (specify):

m. \$ _____

n. TOTAL MONTHLY EXPENSES (add a through m):	n. \$ _____
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5. I, my spouse, and my other dependants owe the following debts:

CREDITOR'S NAME	FOR	MO. PAYMENTS	BALANCE OWED	OWED BY <small>(State person's name)</small>
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6. Other facts which support this Claim of Exemption (i.e., unusual medical needs, school tuition, expenses for recent family emergencies, or other unusual expenses to help your creditor and the judge understand your budget) (describe):
(If more space is needed, attach page labeled Attachment 6.)

7. An earnings withholding order is now in effect with respect to my earnings or those of my spouse or dependants named in item 1 (specify each person's name and monthly amount):

8. A wage assignment for support is now in effect with respect to my earnings or those of my spouse or dependants named in item 1 (specify each person's name and monthly amount):

- 9. My spouse has signed below.
- I have no spouse.
- My spouse and I are living separate and apart.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

	▶	
(TYPE OR PRINT NAME)		(SIGNATURE)
	▶	
(TYPE OR PRINT NAME OF SPOUSE)		(SIGNATURE OF SPOUSE)

