

State of Minnesota

District Court

County of: _____

Court File Number: _____

Judicial District: _____

Case Type: _____

Creditor's full name

vs.

Debtor's full name

and

Third Party (Bank, Employer, or other)

Exemption Form (JGM401)

Minn. Stat. §§§ 550.143, subd. 3c; 551.05, subd. 1d; 571.912, subd. 3

A. How Much Money is Protected (exempt)

- I claim **all** of the money being frozen by the bank is protected.
- I claim **some** of the money is protected. The amount I claim is protected is \$ _____

B. Why the Money is Protected

My money is protected because I get it from one or more of the following places: (Check all that apply)

Earnings (Wages) – All or Some of my wages may be protected.

- Some** of my wages are protected because they were only deposited in my account in the last 20 days.

For wages that were deposited in your account within the last 20 days, the amount protected is whichever is more:

- 75% or more of your wages (after taxes are taken out), or
- The current minimum wage times 40 per week. You can find the current minimum wage online at www.dli.mn.gov/minwage.

All of my wages are protected because:

- I get government benefits (a list of government benefits is on the next page)
- I am getting other assistance based on need

- I have gotten government benefits in the last 6 months
- I was in jail or prison in the last 6 months

If you check one of these 4 boxes, your wages are only protected for 60 days after they are deposited in your account. You **MUST send the creditor copies of bank statements** that show what was in your account **for the 60 days right before the bank froze your money.**

Government Benefits

Government benefits can include many things. For example:

- MFIP** – Minnesota Family Investment Program
- DWP** - MFIP Diversionary Work Program
- SNAP** – Supplemental Nutrition Assistance Program
- GA** – General Assistance
- EGA** – Emergency General Assistance
- MSA** – Minnesota Supplemental Aid
- MSA- EA** – MSA Emergency Assistance
- EA** – Emergency Assistance
- Energy or Fuel Assistance**
- Work Participation Cash Benefit**
- MA** – Medical Assistance
- MinnesotaCare**
- Medicare Part B** - Premium Payments help
- Medicare Part D** - Extra
- SSI** – Supplemental Security Income
- Tax Credits** – federal Earned Income Tax Credit (EITC), MN Working family credit
- Renter’s Refund** (also called Renter’s Property Tax Credit)

List the case number and county for every box you checked:

Case Number: _____ County: _____

Case Number: _____ County: _____

Case Number: _____ County: _____

Government benefits also include:

- Social Security benefits
- Unemployment benefits
- Workers’ compensation
- Veterans’ benefits

If you get any of these government benefits, include copies of any documents that show you get them.

- I get other assistance based on need that is not on the list. It comes from:

Make sure you include copies of any documents that show this.

C. Other Protected Funds

The money from these things are also completely protected after they are deposited in my account.

- Child Support
- A retirement, disability, or accident pension or annuity
- Earnings of my child who is under 18 years of age
- Payments to me from a life insurance policy
- Money paid to me from a claim for damage or destruction of property. Property includes household goods, farm tools or machinery, tools for my job, business equipment, a mobile home, a car, a musical instrument, a pew or burial lot, clothes, furniture, or appliances.
- Death benefits paid to me

I give my permission to any agency that has given me benefits to give information about my benefits to the creditor named above or to the creditor's lawyer. The information will **only** be if I get assistance, or if I have gotten assistance in the past 6 months. If I was an inmate in the last 6 months, I give my permission to the correctional institution to tell the creditor named above or the creditor's lawyer that I was an inmate there.

You must sign this form and send it back to the creditors lawyer (or to the creditor, if there is no lawyer) and the bank. Remember to include a copy of your bank statements for the past 60 days. Fill in the blanks below and go back to the instructions to make sure you did it correctly.

I mailed or delivered a copy of this form to the creditor's lawyer (or to the creditor, if there is no lawyer) at the address listed below.

Creditor's Signature: _____
(or creditor's lawyer's signature)

Creditor's Name: _____
(or creditor's lawyer's name)

Street Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

I also mailed or delivered a copy of this exemption form to my bank at the address listed below:

Bank's Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

Date: _____

Debtor's Signature: _____

Debtor's Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____

Email: _____