

State of Alabama
Unified Judicial System
Form C-21 Rev. 7/2017

PROCESS OF GARNISHMENT



ELECTRONICALLY FILED
7/29/2025 7:29 AM
31-CV-2019-900093.00
CIRCUIT COURT OF
ETOWAH COUNTY, ALABAMA
CASSANDRA JOHNSON, CLERK

IN THE CIRCUIT COURT ETOWAH COUNTY, ALABAMA

NAME AND ADDRESS OF PLAINTIFF (Persons Asserting Claim):

GADSDEN REGIONAL MEDICAL CENTER, L.L.C. D/B/A GADSDEN REGIONAL MEDICAL CENTER (C001)
1007 Goodyear Ave.
Gadsden, AL 35903

NAME AND ADDRESS OF DEFENDANT (Person Whose Property is Subject to Garnishment):

DESTNEY HOWARD
XXX-XX-2109
613 CRESTVIEW DR
GADSDEN, AL, 35903

NAME AND ADDRESS OF ATTORNEY OR REPRESENTATIVE FOR PLAINTIFF:

JAMES JOSEPH EUFINGER
PO BOX 10110
COLUMBIA, MO 65205
(888) 233-3141

DATE OF JUDGMENT: 06/10/2019

JUDGMENT AMOUNT: \$ 51,571.17

INTEREST: \$ 23,016.28

COSTS: \$ 452.09

LESS CREDIT: \$ 0.00

OTHER: \$ 0.00

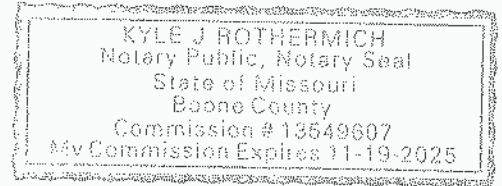
TOTAL: \$ 75,039.54

NAME AND ADDRESS OF GARNISHEE:

DOMINO'S PIZZA
ATTN:MANAGER
1015 W MEIGHAN BLVD SUITE E,
Gadsden, AL 35901

AFFIDAVIT

- A. I make oath that I have obtained the above judgment and believe the named garnishee is or will be indebted to the named defendant or has or will have effects of the defendant under the garnishee's control. I believe that a Process of Garnishment against the garnishee is necessary to obtain satisfaction of the judgment.
- B. The garnishment is for wages, salary, or other compensation, and I further make oath that the amount to be withheld must be 25% of disposable earnings for the week or the amount by which is disposable earnings for the week exceed 30 times the federal minimum wage in effect at the time earnings are payable, WHICHEVER IS LESS.
- C. I hereby request disbursement of amounts periodically paid into Court pursuant to this garnishment.



JUL 28 2025

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Public/Clerk (Signature)

Affiant/Attorney (Signature)