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(Name)

(Address)

(City, State, Zip)

(Telephone)
Defendant, *Pro Se*

**EIGHTH JUDICIAL DISTRICT COURT
CLARK COUNTY, NEVADA**

Plaintiff,
vs.

Defendant.

Case No.: _____
Dept. No.: _____

**AFFIDAVIT CLAIMING
EXEMPTION FROM
EXECUTION**

I, _____ (name), being duly sworn, state that:

I am the Defendant in the above-entitled action and have received a Notice of Execution regarding an attachment or garnishment of my wages, money, benefits, and/or property. These wages, money, benefits, and/or property are exempt by law from execution for the following reason(s):

(Check all that apply)

- Money or payments received pursuant to the federal Social Security Act (NRS 21.090(1)(y) and 42 U.S.C. § 407(a)).
- Money or payments for assistance received from the Division of Welfare and Supportive Services of the State of Nevada (NRS 422.291 and 422A.325).
- Money or payments received as unemployment insurance benefits (NRS 612.710).
- Money or compensation payable or paid under NRS Chapter 616A and 616D (worker's compensation/industrial insurance) (NRS 616C.205).
- Money or payments received as Veteran's Benefits (38 U.S.C. § 5301).

1 [] Money or payments received as retirements benefits under the Civil Service
2 Retirement System (CSRS) or Federal Employee Retirement System (FERS) (5 USC
3 § 8346).

4 [] Seventy-five percent (75%) of my disposable earnings are exempt. “Disposable
5 earnings” are defined as those earnings remaining “after the deduction . . . of any
6 amounts required by law to be withheld.” NRS 21.090(g)(1). The “amounts required
7 by law to be withheld” are federal income tax, Medicare, and Social Security taxes.

8 [] Check here if your disposable weekly earnings do not exceed \$362.50 or 50
9 times the federal minimum wage (50 x \$7.25 = \$362.50), in which case ALL of
10 your disposable earnings are exempt (NRS 21.090(1)(g)).

11 [] Non-exempt income cannot exceed 25% of your weekly disposable earnings
12 under NRS 31.295. Check here if your disposable weekly earnings are between
13 \$362.50 and \$483.33. In this case, your exempt income is always \$362.50 and
14 your non-exempt income is your disposable earnings minus \$327.50. Put
15 amount of non-exempt income here: _____.

16 [] Money or payments received pursuant to a court order for child support or alimony,
17 including any arrearage (NRS 21.090(1)(s) and 21.090(1)(t)).

18 [] Money derived from the federal Earned Income Tax Credit (EITC) or similar Nevada
19 program (NRS 21.090(1)(aa)).

20 [] \$1,000 or less of my money or other personal property, _____,
21 which is not otherwise exempt under NRS 21.090 (NRS 21.090(1)(z)).

22 [] Money, \$500,000 or less, held in a retirement plan in accordance with Internal
23 Revenue Codes, including, but not limited to, an IRA, 401k, 403b, or other qualified
24 stock bonus, pension, or profit-sharing plan (NRS 21.090(1)(r)).

25 [] All money, payments, or benefits derived in any way from a life insurance policy, if
26 the annual premium does not exceed \$15,000. If the premium exceeds that amount, a
27 similar exemption exists which bears the same proportion to the money, benefits,
28 privileges and immunities so accruing or growing out of the insurance that the \$15,000

bears to the whole annual premium paid (NRS 21.090(1)(k)).

Money or payments received pursuant to NRS Chapter 286 (The Public Employees Retirement Act) (NRS 286.670).

A homestead filed pursuant to NRS 115.010 in a dwelling (house, condominium, townhome, and land) or mobile home where my equity does not exceed \$550,000 (NRS 21.090(1)(l) and NRS 115.010).

My dwelling house and land where the amount of my equity does not exceed \$550,000 (NRS 21.090(m)).

Check here if the debt is based on a medical bill. Your primary dwelling and land, including a mobile or manufactured home, is exempt from execution regardless of the equity (NRS 21.095).

My vehicle where the amount of equity in my vehicle does not exceed \$15,000, or I will pay the judgment creditor any amount over \$15,000 in equity (NRS 21.090(1)(f)).

Check here if your vehicle is specially equipped or modified to provide mobility for you or your dependent and either you or your dependent has a permanent disability. Your vehicle is exempt regardless of the equity (NRS 21.090(1)(p)).

A prosthesis or any equipment prescribed by a physician or dentist for me or my dependent (NRS 21.090(1)(q)).

My private library, works of art, musical instruments, jewelry, or keepsakes belonging to me or my dependent, chosen by me and not to exceed \$5,000 in value (21.090(1)(a)).

My necessary household goods, furnishings, electronics, clothes, personal effects, or yard equipment, belonging to me or my dependent, chosen by me and not to exceed \$12,000 in value (21.090(1)(b)).

Other: _____

1 It is requested that these [] wages, [] bank account, [] benefits, [] other accounts/
2 funds, [] personal or real property be returned or released to me within 5 days of receipt of this
3 Affidavit in accordance with NRS 21.112.

4 DATED this _____ day of _____, 20____.

5 Pursuant to NRS 53.045, I declare under penalty of
6 perjury that the foregoing is true and correct.

7 _____ (signature)
8 Defendant, *Pro Se*

9
10 **CERTIFICATE OF MAILING**

11 I HEREBY CERTIFY that on the _____ day of _____, 20____, I placed a
12 true and correct copy of the foregoing **AFFIDVIT CLAIMING EXEMPTION FROM**
13 **EXECUTION** in the United States Mail, with first-class postage prepaid, addressed to the
14 following:

15 Plaintiff/Judgment Creditor: _____
16 _____
17 _____
18 _____

19 and to the following:

20 [] Sheriff or [] Constable _____
21 _____
22 _____
23 _____

24 Pursuant to NRS 53.045, I declare under penalty of
25 perjury that the foregoing is true and correct.

26 _____ (signature)
27 Defendant, *Pro Se*