
SERVICE OF GARNISHMENT SUMMONS DESIGNATION FORM

(In accordance with Neb. Rev. Stat. §§ 25-1010 and 25-1056)

Main Chartered Office in Nebraska

Please complete this section if the main chartered office is in Nebraska.

Please note: Only the main chartered office location may be designated for service of summons.

New Modification Revocation

Financial Institution: _____

Street Address: _____

City: _____ State: Nebraska Zip: _____

Name of Person Completing Form: _____

Telephone Number: _____ Email: _____

Main Chartered Office in a State Other than Nebraska

Please complete this section if the main chartered office is in another state.

Please note: You may designate a Nebraska office, branch, or an agent to receive the service of summons.

New Modification Revocation

Financial Institution: _____

Main Chartered Office Address: _____

Name of Person Completing Form: _____ Telephone Number: _____

Where do you wish to receive notification relating to summons and orders of garnishment?

Office Branch Agent

Name of office, branch or agent: _____

Street Address of option selected: _____

City: _____ State: Nebraska Zip: _____

Telephone Number: _____ Email: _____