Order to Withhold and Deliver Answer Sheet

01531

Re:

SITAFAO VAA

SSN:

575-33-0639

Balance: \$499.54

Date: 7/30/2014

To: REDMAN VAN/STORAGE

Please start deducting immediately and send payments at least monthly.

Complete and fax or mail this page

Fax: (866) 610-9235

OR

Mail:

Employment Security Department

Benefit Payment Control

PO Box 24928

Seattle, WA 98124-0928

Interest is charged at 1% per month. Please call for a payoff balance when nearing the end of this debt.

You can pay online using your bank account https://onlinebill.paystation.com/esd/

1) Provide total gross wage	es minus mandatory deductio	ns required by federal and sta	ate laws. \$
(Disposable Earnings)			243.82
2) Check how often you is: Weekly			
Weekly Bi-Weekly Monthly Semi-Monthly 3) Use the chart below to determine the maximum amount to withhold of disposable earnings,			
not to exceed 25%.	etermine the maximum amou	unt to withhold of disposable	
Weekly	Biweekly	Somino and L	\$ Ø
\$253.75 or less		Semimonthly	Monthly
	\$507.50 or less	\$549.79 or less	\$1,099.58 or less
Do Not Withhold	Do Not Withhold	Do Not Withhold	Do Not Withhold
More than \$253.75	More than \$507.50	More than \$549.79	More than \$1,099.58
but less than \$338.33	but less than \$676.66	but less than \$733.05	but less than \$1,466.10
Withhold amount above	Withhold amount above	Withhold amount above	Withhold amount above
\$253.75 \$338.33 or more	\$507.50	\$549.79	\$1,099.58
	\$676.66 or more	\$733.05 or more	\$1,466.10 or more
25% of Disposable	25% of Disposable	25% of Disposable	25% of Disposable
Earnings	Earnings	Earnings	Earnings
4) Check any other garnishments or levies you are withholding and the total amount. Child Support IRS Other 60-Day			
Provide company name and expiration data			
5) Subtract line 4 from line 3. If negative, enter 0. This is the amount to send.			
Employee's current address: If no longer employed, date of separation:			
Employee's new employer: Employer comments:			
Employee's new employer: Employer comments:			
Under penalty of perjury, I affirm that the information above is true, correct and complete.			
boot 7' 1			
Company Representative Name (print) Company Representative (signature) Title (print)			
Redman Van & Storage 801-972-4420 801-972-6598			
Company Name (print) Phone (including area code) Fax (including area code)			
Tax (including area code)			
9/12/14			
Date /			
 			
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