

ATTORNEY (Name, State Bar number, and address):   TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR STATE TAX AGENCY: _____	FOR COURT USE ONLY
NAME OF COURT: STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
APPLICATION OF (Name):  <div style="text-align: right;">TAXPAYER / RESPONDENT</div>	
<b>EARNINGS WITHHOLDING ORDER FOR TAXES</b>	CASE NUMBER:
NAME OF STATE TAX AGENCY:	TAX AGENCY NUMBER:

1. The State's *Application for Earnings Withholding Order for Taxes* came on for hearing on (date): \_\_\_\_\_ in  Dept.:  Div.:  Room: \_\_\_\_\_ before (name of judicial officer): \_\_\_\_\_
2. a.  Attorney for state tax agency present in court (name):  
 b.  Taxpayer present in court.  
 c.  Attorney for taxpayer present in court (name):
3. The court has considered  the taxpayer's *Claim of Exemption and Financial Declaration*  the evidence presented  the parties' stipulation.
4. **THE COURT FINDS**
  - a. The taxpayer (employee) is entitled to a monthly exemption of: \$ \_\_\_\_\_
  - b. The taxpayer is employed by (name and address of employer): \_\_\_\_\_
  - c.  \$ \_\_\_\_\_ has been withheld from the employee's earnings under a *Temporary Earnings Withholding Order for Taxes*.
5. **THE COURT ORDERS the employer to**
  - a. withhold and pay to the state tax agency: \$ \_\_\_\_\_ from the employee's disposable earnings each month.
  - b. pay to the employee any disposable earnings above that amount, not to exceed: \$ \_\_\_\_\_ per month.
  - c. WITHHOLD AND PAY TO THE STATE TAX AGENCY ANY DISPOSABLE EARNINGS ABOVE THOSE SET FORTH IN ITEMS 4a AND 4b.
  - d. begin withholding with the first pay period that ends on or after the 10th day after this order is served.
  - e. continue withholding until the tax liability has been satisfied unless an order with higher priority is received.
  - f. send all sums withheld to the state tax agency within 10 days after the last paycheck of each month.
  - g.  other (specify): \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
JUDICIAL OFFICER

(Instructions to employer on reverse)

APPLICATION OF (Name):  <p style="text-align: center;">TAXPAYER / RESPONDENT</p>	CASE NUMBER:
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**INSTRUCTIONS TO EMPLOYER**

**A. When remitting withheld sums to the state tax agency, include the employee's name and social security number, and the tax agency number.**

**B. PRIORITY OF EARNINGS WITHHOLDING ORDERS**

- First**     Order Assigning Salary or Wages
- Second:** Earnings Withholding Order for Support
- Third:**    Earnings Withholding Order for Taxes
- Fourth:**    Earnings Withholding Order