

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF VIRGINIA

In re: _____)
 _____) **Case No:**
 Debtor /Employee.)

Employer	Chapter 13 Trustee (Payments must be sent to this address)
Name: Address: (if known) Email: Phone:	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> ACH Options: <input style="width: 150px;" type="text"/>

The Court orders:

1. The Employer must deduct the following amounts from wages payable to (SSN xx-xx-) and send the deducted funds to the Chapter 13 Trustee:

Monthly	Semi-monthly	Bi-weekly	Weekly
	Monthly x 12/24	Monthly x 12/26	Monthly x 12/52

The Employer must include the case number and the Debtor/Employee’s name on each check and may convert the monthly amount to the Employee’s pay-period based on the formula above.

2. The first deduction must occur no later than the first payday following 7 days after the Employer receives this Order and be promptly sent to the Trustee. Deductions for pay periods thereafter may be accumulated but must be sent to the Trustee at least monthly. **The Employer must not charge or require a fee or other cost for compliance with this Order.**

3. **This Order is NOT subject to any limitation under federal or state law regarding garnishments and all available NET pay must be used to satisfy this Order.** The deduction is to be made after payment of federal and state tax withholdings, social security taxes, child support, employee pension or retirement contributions, union dues, and employee insurance premiums.

4. An order may be entered during the life of this case that amends the amount of the payments and the Employer must comply with any amendment.

5. This Order remains effective until the earlier of a termination order issued by this Court or the Employee's separation from the Employer. The Employer should notify the Trustee upon the Employee's separation.

6. Failure to comply with the terms of this Order may result in the Court taking further action to enforce its terms, including but not limited to a show cause for contempt. Questions about this Order should be directed to the Trustee listed above.

A copy of this Order will be noticed to any party entitled to receive electronic notice via CM/ECF and shall also be mailed to the Employer identified on the first page as well as to the party(ies) identified as follows:

Name:
Address:

****END OF ORDER****

I ask for this:

/s/ _____

Attorney Name:
Bar Number:
Firm Name:
Address:

Phone Number:
Email Address: