

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
\_\_\_\_\_ COUNTY ILLINOIS

vs. Plaintiff- No. \_\_\_\_\_  
Defendant- Return date \_\_\_\_\_  
and Employer 21 to 40 days after date of issuance  
of summons

**AFFIDAVIT FOR WAGE DEDUCTION ORDER**

\_\_\_\_\_ on oath states:  
1. I believe employer \_\_\_\_\_ is indebted to the  
judgment debtor \_\_\_\_\_ for wages due or  
to become due. Employer's address is: \_\_\_\_\_  
2. The last known address of the judgment debtor is \_\_\_\_\_

I request that a summons issue directed to employer and I certify that a copy of the attached Wage Deduction Notice was mailed to judgment debtor, by first class mail, at his/her last known address prior to filing of this wage deduction proceeding.

Name:  
Attorney for Judgment Creditor:  
Address:  
City/ZIP:  
Telephone:

Affiant: \_\_\_\_\_  
Under penalty of perjury as provided by law pursuant to 735 ILCS 5/1-109 the affiant certifies that the statements set forth herein are true and correct.

**CERTIFICATE OF ATTORNEY OR JUDGMENT CREDITOR**

NOTE: Non-Attorneys must also submit a copy of the underlying judgment or a certification by the clerk of the court that entered the judgment.

I, the undersigned certify under penalties as provided by law pursuant to 735 ILCS 5/1-109 that the following information is true:

- 1. Judgment in the above captioned case was entered on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_
- 2. The amount of judgment was \_\_\_\_\_ \$ \_\_\_\_\_
- 3. Allowable costs previously expended:
  - a. Initial filing fee \_\_\_\_\_ \$ \_\_\_\_\_
  - b. Original and alias summons \_\_\_\_\_ \$ \_\_\_\_\_
  - c. Filing and summons costs of prior supplementary proceedings \_\_\_\_\_ \$ \_\_\_\_\_
- 4. Filing and summons cost for this proceeding \_\_\_\_\_ \$ \_\_\_\_\_
- 5. Statutory interest due on Judgment from date above \_\_\_\_\_ \$ \_\_\_\_\_
- Total \$ \_\_\_\_\_

DEDUCT: Total amount paid by or on behalf of the judgment debtor prior to this proceeding \_\_\_\_\_ \$ \_\_\_\_\_  
BALANCE DUE JUDGMENT CREDITOR \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_  
Attorney or Judgment Creditor (OVER)

Return Date \_\_\_\_\_

Case Number: \_\_\_\_\_

**INTERROGATORIES/ANSWER TO WAGE DEDUCTION PROCEEDINGS**

Employer/Agent: \_\_\_\_\_, certifies under penalty of perjury that the following Answer is true and correct to the best of her/his knowledge and belief concerning the property of the judgment debtor:

Debtor Name: \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Do you pay monies to the judgment debtor listed above? Yes \_\_\_\_\_ No \_\_\_\_\_

State whether any funds paid to the debtor are for disability, retirement or are in any other way exempt or subject to other Court Order: \_\_\_\_\_

One Pay Period equals: \_\_\_\_\_ day(s) \_\_\_\_\_ week(s) \_\_\_\_\_ month(s)

**CALCULATION TO DETERMINE AMOUNT OF WITHHOLDING:**

(A) Gross Wages minus mandatory contributions to pension or retirement plans is (A) \_\_\_\_\_

(B) Method I - 15% of (A) = (B) \_\_\_\_\_

Method II

(C) Enter Total FICA, State and Federal Tax and Medicare (C) \_\_\_\_\_

(D) Subtract (C) from (A) = (D) \_\_\_\_\_

(E) Enter Minimum wage per pay period (45 x \$5.15 per week) (E) \_\_\_\_\_

(F) Subtract (E) from (D) (F) \_\_\_\_\_

(G) Enter the lesser of Line (b) or (f) (G) \_\_\_\_\_

(H) Enter Child Support of other Court Ordered Deduction (H) \_\_\_\_\_

(I) Subtract (H) from (G) (I) \_\_\_\_\_

(J) Subtract Employer's Statutory Fee (5/12-814) (J) \_\_\_\_\_

(K) Amount to be applied to judgment (K) \_\_\_\_\_

Line I is the amount to be withheld from employee's paycheck as of the date of service of Summons and not disbursed until further order of Court.

Signature of Employer \_\_\_\_\_

**INSTRUCTIONS**

1. Mail a copy of this Answer to the Court and mail to attorney for Plaintiff and give a copy to the Defendant.
2. You will receive a copy of a Court Order by fax or mail instructing you how to proceed and where to send deducted funds.

Employer/Agent:

Agent Name \_\_\_\_\_

Clerk of the Circuit Court

Employer Name \_\_\_\_\_

\_\_\_\_\_ County Courthouse

Address \_\_\_\_\_

\_\_\_\_\_ Street

Phone \_\_\_\_\_

\_\_\_\_\_ City, State, Zip

Fax \_\_\_\_\_

Note: A copy of this Answer should be mailed to the Court, Attorney for Plaintiff or Judgment Creditor and to the Defendant.