

**INSTRUCTIONS TO  
FEDERAL AGENCIES  
for Preparing  
Administrative  
Wage Garnishment Forms**

**February 1999**

**U.S. Department of the Treasury  
Financial Management Service  
Debt Management Services**

**Instructions to Federal Agencies  
Preparing Administrative Wage Garnishment Forms**

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**AWG Form**

## **Instructions to Federal Agencies Preparing Administrative Wage Garnishment Forms**

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### **Purpose**

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This document explains how Federal agencies prepare administrative wage garnishment orders. This document does not confer any rights that a person would not otherwise have, nor does failure to follow the instructions contained in this document necessarily invalidate an administrative wage garnishment order.

### **Background**

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Wage garnishment is a process whereby an employer withholds amounts from an employee's wages and pays those amounts to the employee's creditor in satisfaction of a wage garnishment order issued by the creditor. A Federal agency collecting delinquent nontax debt may garnish the wages of a delinquent debtor without first obtaining a court order. This process, known as "administrative wage garnishment," is authorized by section 31001(o) of the Debt Collection Improvement Act of 1996 (DCIA), Pub. L. 104-134, 110 Stat. 1321-358 (Apr. 26, 1998), codified at 31 U.S.C. § 3720D. The rules and procedures governing administrative wage garnishment were published as a Final Rule in the *Federal Register* on May 6, 1998 (63 FR 25136) (hereafter referred to as the "Final Rule"). In accordance with the Final Rule, the Financial Management Service (FMS), a bureau of the U.S. Department of the Treasury, promulgated Standard Form 329 (SF-329) which Federal agencies are required to use to issue administrative wage garnishment (AWG) orders. See below for information on obtaining AWG forms. This document provides agencies with step-by-step instructions for preparing AWG orders using the standard form.

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**Paperwork Reduction Act**

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The administrative wage garnishment process under the DCIA is an administrative action taken by a Federal agency against a debtor's employer. Therefore, any collection of information under the AWG order is exempt from the requirements of the Paperwork Reduction Act of 1980 (44 U.S.C. § 3501 *et seq.*). See 44 U.S.C. § 3518(c)(1)(B)(ii) (Act does not apply to the collection of information during the conduct of an administrative action involving an agency against specific individuals or entities).

## Instructions to Federal Agencies Preparing Administrative Wage Garnishment Forms

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### AWG Statutory and Regulatory Requirements

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Federal agencies must ensure that AWG orders are issued in accordance with the requirements of the DCIA and the Final Rule. Before issuing any AWG orders, agencies should review the requirements of 31 U.S.C. § 3720D and 31 C.F.R. § 285.11 (63 FR 25136, May 6, 1998) with their agency counsel.

1. Notice to the debtor. At least 30 days before an agency initiates garnishment proceedings, the agency must give the debtor written notice informing him or her of the nature and amount of the debt, the intention of the agency to collect the debt through deductions from pay, and an explanation of the debtor's rights regarding the proposed action.
2. Due process. The agency must provide the debtor with an opportunity to inspect and copy the agency's records related to the debt, to establish a repayment agreement, and to receive a hearing concerning the existence or amount of the debt and the terms of a repayment schedule.
3. Hearings. Agencies must prescribe regulations for the conduct of AWG hearings. A hearing must be held prior to the issuance of a AWG order if the debtor's request is timely received. For hearing requests that are not received in the specified time frame, an agency need not delay the issuance of the AWG order prior to conducting a hearing. The hearing official must issue a written decision no later than 60 days after the date on which the request for such hearing was received by the agency.

## Instructions to Federal Agencies Preparing Administrative Wage Garnishment Forms

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### Preparing the AWG Form

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Unless the agency receives information that the agency believes justifies a delay or cancellation of the AWG order, the agency issuing the AWG order is required to send, by first class mail, an AWG order to the debtor's employer (1) within 30 days after the debtor fails to make a timely request for a hearing, or, (2) if the debtor made a timely request for a hearing, within 30 days after a final decision is made by the agency to proceed with the garnishment.

The AWG form (SF-329) consists of 4 documents, copies of which are attached as **Appendix A**. See below for information on obtaining AWG order forms. The agency issuing the AWG order should mail all of the following 4 documents in one package to the employer after preparing the package in accordance with these instructions:

1. Letter to Employer & Important Notice to Employer (SF-329A);
2. Wage Garnishment Order (SF-329B);
3. Wage Garnishment Worksheet (SF-329C); and
4. Employer Certification (SF-329D).

#### **Letter to Employer & Important Notice to Employer (SF-329A)**

The agency is not required to insert any information on the Letter to Employer & Important Notice to Employer. This document explains the purpose of the AWG order and alerts the employer to its responsibility to comply with the directions contained in the AWG order as well as the employer's legal obligations with respect to the AWG order.

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**Wage Garnishment Order (SF-329B)**

The Wage Garnishment Order must be completed by the agency issuing the AWG order in accordance with the following instructions.

**Box #**

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- 1 *Date of this Order.* Insert the date the agency issued the AWG order. The date the agency issued the order is the date an agency official determines that the debtor failed to make a timely request for a hearing, or if the debtor made a timely request for a hearing, the date a final decision is made by the agency to proceed with the garnishment.
- 2 *Date mailed to Employer.* Insert the date the agency mailed the AWG order. Agencies should take the necessary steps to ensure that the AWG order is mailed the same day as the date inserted in this box.
- 3 *Creditor Agency Tracking No.* Insert the number used by the agency to identify the AWG order. If the debt number is used, agencies should include an additional identifier unique to the AWG order in the event of multiple AWG orders for a debtor with more than one employer.
- 4 *Employee Name.* Insert the full name of the debtor and any alias names by which the debtor may be known *e.g.*, Dave Debtor, also known as David B. Debtor.
- 5 *Employee Social Security No.* Insert the debtor's social security number.

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**Box #**

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- 6-7 *Employer and Employer Mailing Address.* Insert the complete legal name and mailing address of the debtor's employer. Agencies should not abbreviate the name of the employer. For example, *Donut Shop of America, Inc.* should not be shortened to *Donut Shop* as the latter may be a different entity. To the extent practical, agencies should contact the debtor's employer to obtain the legal name and address of the debtor's employer. For corporations, agencies may verify the information with the centralized corporation records maintained by the State in which the employer is doing business. For other entities, agencies may verify the information with centralized records maintained by the county or town in which the employer is doing business.
- 8-9 *Creditor Agency and Creditor Agency Mailing Address.* Insert the complete name and mailing address of the agency issuing the AWG order. Agencies should be identified as agencies of the United States, for example, *U. S. Department of the Treasury* rather than *Department of the Treasury*, to avoid confusion with State agencies with similar names.
- 10-13 *Contact Name, Telephone No., Internet e-mail address, and Fax No.* Insert the name, telephone number (with area code), internet e-mail address, and fax number (with area code) of a person within the creditor agency who can respond promptly to questions about the information contained in the AWG order. While an individual's name is preferable, if necessary, the contact name may be a department, for example, *Debt Collection Operations Division*.
- 14-15 *Amount Due and As of (Month/Day/Year).* Insert the total amount due and the date this amount was calculated. Agencies should ensure that the amount due includes all interest, penalties, and other costs as of the date listed in the *As of* box.

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### Box #

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#### *Section 1. Order*

- 16-20 *ABA Routing No., Account No., Agency Location Code (ALC) No., Account Title, and Other information required (i.e., tracking no., debtor name, etc.).* Insert information required for an employer to transmit electronically amounts withheld under the AWG order to the agency. Agencies should encourage employers to pay amounts withheld under AWG orders electronically and should explore options to make cost-effective electronic payment mechanisms available to employers. For additional information regarding electronic payment mechanisms and procedures in the Federal Government, agencies should contact FMS' Financial Services Division at **(202) 874-6580**.
- 21 *Mailing address for check payments.* Insert the address to which the employer may mail amounts withheld under the AWG order in the form of a check. The mailing address for check payments should be included even if electronic payment information is provided in boxes #16-20.

#### *Section 2. Wage Garnishment Amount.*

(a) If the agency has agreed with the debtor to an exact dollar amount to be deducted from the debtor's wages, insert the dollar amount in Section 2(a). For example, if the agency and the debtor agree that \$100 per pay period may be deducted from the debtor's wages, insert *100* after the "\$" in Section 2(a). If Section 2(a) is completed, the agency should skip Section 2(b) and proceed to *Creditor Agency Certification*.

(b) If Section 2(a) is not completed (because the agency and debtor have not agreed to an exact dollar amount to be deducted from the debtor's wages), the agency **must** complete Section 2(b)(1). Insert the percentage of the debtor's disposable pay that the employer is ordered to deduct. **The percentage will be 15% unless the agency either agrees to a different**

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**percentage, or is ordered by a hearing official to accept a different percentage, e.g., 10%.**

*Creditor Agency Certification.* The head of the agency, or his or her delegatee, **must** sign the Wage Garnishment Order. The delegatee must be an official or employee of the agency. In addition, the signatory's printed name and title should be printed or typed where indicated.

**Wage Garnishment Worksheet (SF-329C)**

The agency is not required to insert any information on the Wage Garnishment Worksheet. The Worksheet may be used by the employer to calculate the Wage Garnishment Amount to be deducted from a debtor's disposable pay under the AWG order. At the agency's option, the agency may insert the *debtor name* and *social security number* as a convenience to the employer. The agency must include the Worksheet as part of the AWG order form even if the Wage Garnishment Order specifies a dollar amount to be withheld because the employer may wish to attach the Worksheet to the Employer Certification. See paragraph #3 of the *Employer Certification*.

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**Employer Certification (SF-329D)**

The information on the Employer Certification to be completed by the agency issuing the AWG order duplicates some of the information required to be provided by the agency on the Wage Garnishment Order (SF-329B) as instructed above. The agency issuing the AWG order must complete the following:

*Date of this Order.* Insert the date the agency issued the order from box #1 of the Wage Garnishment Order.

*Date mailed to Employer.* Insert the date the agency mailed the order from box #2 of the Wage Garnishment Order.

*Creditor Agency Tracking No.* Insert the number used by the agency to identify the AWG order from box #3 of the Wage Garnishment Order.

*Creditor Agency and Creditor Agency Mailing Address.* Insert the complete name and mailing address of the agency issuing the AWG order from boxes #8-9 of the Wage Garnishment Order.

*Employee Name.* Insert the full name of the debtor and any alias names by which the debtor may be known from box #4 of the Wage Garnishment Order.

*Employee Social Security No.* Insert the debtor's social security number from box #5 of the Wage Garnishment Order.

The **employer** is required to complete the rest of the Employer Certification and to return the completed Employer Certification to the agency issuing the AWG order. An authorized representative of the employer is required to sign and date the Employer Certification at the bottom of page 2 of the Employer Certification.

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### **How to Obtain AWG Forms**

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Creditor agencies may obtain AWG forms from FMS' web site at:  
*<http://www.treas.gov/debt>*, or at GSA's website at:  
*<http://www.gsa.gov/forms/forms.htm>*, or order them through the Federal Supply Service.

### **Inquiries**

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Any inquiries may be made to:

Financial Management Service  
Debt Management Services  
Liberty Center  
401 14th St., SW  
Washington, DC 20227  
Attn: Manager, Training and Education Branch, DMS  
Telephone: (202) 874-6660  
Facsimile: (202) 874-7494

For additional information on AWG or debt collection, see FMS' web site at:  
*<http://www.treas.gov/debt>*.

**APPENDIX A**

**ADMINISTRATIVE WAGE**

**GARNISHMENT FORM**

**ADMINISTRATIVE  
WAGE GARNISHMENT  
FORM SF-329**

**Notice to Federal Agencies:**

In addition to this coversheet, this Administrative Wage Garnishment package includes:

**SF-329A** Letter to Employer & Important Notice to Employer

**SF-329B** Wage Garnishment Order

**SF-329C** Wage Garnishment Worksheet

**SF-329D** Employer Certification

*Complete instructions to Federal Agencies preparing  
Administrative Wage Garnishment Form SF-329 may  
be obtained from the Financial Management Service's  
web site at: <http://www.treas.gov/debt>, or by calling  
the Financial Management Service at (202) 874-0540.*

**Brief Instructions:**

The Federal Agency issuing the Wage Garnishment Order is referred to as the "Creditor Agency." The Creditor Agency must complete this Administrative Wage Garnishment form and mail all parts (SF-329A, SF-329B, SF-329C, and SF-329D) of the form to the employer of the individual who owes a delinquent debt to the Federal Government. However, failure to include all parts of the form (other than the Wage Garnishment Order, SF-329B) will not invalidate the wage garnishment order. The individual who owes a delinquent debt to the Federal Government is referred to as the "employee" or the "debtor."

**Letter to Employer and Important Notice to Employer (SF-329A):** The Creditor Agency is not required to insert any information on the Letter to the Employer & Important Notice to the Employer. The Creditor Agency must include this Letter as part of the Administrative Wage Garnishment Form mailed to employers when issuing a wage garnishment order.

(see reverse for additional information)

**ADMINISTRATIVE  
WAGE GARNISHMENT  
FORM SF-329**

**Notice to Federal Agencies (cont.):**

**Brief Instructions (cont.):**

**Wage Garnishment Order (SF-329B):** This Wage Garnishment Order is to be completed by the Federal Agency issuing the Wage Garnishment Order, and must be included as part of the form mailed to employers.

Section 2. Wage Garnishment Amount: If the agency and the debtor have agreed to an exact dollar amount to be deducted from the debtors's wages, insert the dollar amount in section 2(a). If section 2(a) is completed, the agency should skip section 2(b) and proceed to *Creditor Agency Certification*.

If section 2(a) is not completed, the agency must complete section 2(b)(1). Insert the percentage of the debtor's disposable pay that the employer is ordered to deduct. **The percentage will be 15% unless the agency either agrees to a lower percentage or is ordered by a hearing official to accept a lower percentage, e.g. 10%.**

Creditor Agency Certification: The head of the agency, or his or her delegatee, must sign the Wage Garnishment Order. In addition, the signatory's printed name and title should be printed or typed where indicated.

**Wage Garnishment Worksheet (SF-329C):** The Creditor Agency is not required to insert any information on the Wage Garnishment Worksheet. The Creditor Agency must include this blank Wage Garnishment Worksheet as part of the Administrative Wage Garnishment form mailed to employers when issuing a wage garnishment order.

**Employer Certification (SF-329D):** The Creditor Agency must complete the top part of the Employer Certification where indicated, and include the Employer Certification as part of the Administrative Wage Garnishment form mailed to employers. Employers are required to complete the form and return it to the creditor agency within 20 days of receipt.

## **LETTER TO EMPLOYER & IMPORTANT NOTICE TO EMPLOYER**

Dear Employer,

One of your employees has been identified as owing a delinquent nontax debt to the United States. The Debt Collection Improvement Act of 1996 (DCIA) permits Federal agencies to garnish the pay of individuals who owe such debt without first obtaining a court order. Enclosed is a Wage Garnishment Order directing you to withhold a portion of the employee's pay each pay period and to forward those amounts to us. We have previously notified the employee that this action was going to take place and have provided the employee with the opportunity to dispute the debt.

As both a businessperson and a taxpayer you can understand and appreciate the importance of ensuring that duly owed debts do not go unpaid. Your cooperation in complying with the enclosed Wage Garnishment Order will assist in our efforts to collect the billions of dollars in delinquent nontax debt owed to the United States. A Wage Garnishment Worksheet is enclosed to assist you in determining the proper amount to withhold.

Please read the enclosed documents carefully. They contain important information concerning your responsibilities to comply with this Order. If you have any questions, please call the contact name listed on the Order.

Thank you for your cooperation.

***See reverse for Important Notice to Employer.***

Enclosures: Wage Garnishment Order (SF-329B)  
Wage Garnishment Worksheet (SF-329C)  
Employer Certification (SF-329D)

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***Notice to Federal Agencies:*** Complete instructions to Federal Agencies preparing Administrative Wage Garnishment forms may be obtained from the Financial Management Service's web site at <http://www.treas.gov/debt>

## **IMPORTANT NOTICE TO EMPLOYER**

FEDERAL LAW (31 U.S.C. § 3720D, 31 C.F.R. § 285.11) PROVIDES:

1. **Federal law supersedes State law.** Federal law applies to wage garnishment pursuant to the Wage Garnishment Order notwithstanding State law.
2. **Disposable pay.** For purposes of the Wage Garnishment Order, "disposable pay" means the employee's compensation (including, but not limited to, salary, overtime, bonuses, commissions, sick leave and vacation pay) from an employer after the deduction of health insurance premiums and any amounts required by law to be withheld. Proper deductions include Federal, State, and local taxes, State unemployment and disability taxes, social security taxes, and involuntary pension contributions, but do not include voluntary pension or retirement plan contributions, union dues, or amounts withheld pursuant to a court order, and the like. A Wage Garnishment Worksheet is included with the Wage Garnishment Order to assist the employer in calculating disposable pay and the wage garnishment amount.
3. **Multiple Withholding Orders.** If in addition to the Wage Garnishment Order you, as employer, are served with other withholding orders pertaining to the same employee, then you may withhold sufficient amounts to satisfy the multiple withholding orders simultaneously, up to the maximum amount of 25%. The Wage Garnishment Order should be paid before garnishment or withholding orders that you receive after you receive this one, EXCEPT that family support orders always should be paid first. Upon termination of the family support or prior withholding order(s), the amount withheld for the Wage Garnishment Order shall be increased to the amount stated in Section 2 of the Wage Garnishment Order.
4. **Pay cycles.** An employer is not required to vary its normal pay and disbursement cycles to comply with the Wage Garnishment Order.
5. **Failure to comply.** AN EMPLOYER WHO FAILS TO COMPLY WITH THE WAGE GARNISHMENT ORDER SHALL BE LIABLE FOR ANY AMOUNTS THAT THE EMPLOYER FAILS TO WITHHOLD UNDER THE WAGE GARNISHMENT ORDER, PLUS ATTORNEY'S FEES AND COSTS INCURRED BY THE CREDITOR AGENCY TO ENFORCE THE WAGE GARNISHMENT ORDER. IN ADDITION, THE EMPLOYER WHO FAILS TO COMPLY WITH THE WAGE GARNISHMENT ORDER MAY BE LIABLE FOR PUNITIVE DAMAGES AS DETERMINED BY A COURT OF COMPETENT JURISDICTION.
6. **No retaliation.** AN INDIVIDUAL MAY SUE ANY EMPLOYER WHO DISCHARGES FROM EMPLOYMENT, REFUSES TO EMPLOY, OR TAKES DISCIPLINARY ACTION AGAINST AN INDIVIDUAL SUBJECT TO A WAGE GARNISHMENT ORDER BY REASON OF THE FACT THAT THE INDIVIDUAL'S WAGES HAVE BEEN SUBJECT TO GARNISHMENT UNDER 31 U.S.C. § 3720D. A COURT OF COMPETENT JURISDICTION SHALL AWARD ATTORNEY'S FEES TO A PREVAILING EMPLOYEE, AND, IN ITS DISCRETION, MAY ORDER REINSTATEMENT OF THE INDIVIDUAL, AWARD PUNITIVE DAMAGES AND BACK PAY TO THE EMPLOYEE, OR ORDER SUCH OTHER REMEDY AS MAY BE REASONABLY NECESSARY.

**UNITED STATES GOVERNMENT**  
**WAGE GARNISHMENT ORDER (SF-329B)**

1. Date of this Order:	2. Date Mailed to Employer:	3. Creditor Agency Tracing No. (refer to this number in all correspondence):
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**RE:**

4. Employee Name:	5. Employee Social Security No.:
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**TO:**

6. Employer:	7. Employer Mailing Address (include street address, p.o. box, suite no., city, state, zip code):
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**FROM:**

8. Creditor Agency:	9. Creditor Agency Mailing Address (include street address, city, state, zip code):
10. Contact Name:	11. Telephone No.:
12. Internet e-mail address:	13. Fax No.:

14. Amount Due: \$	15. As of (Month/Day/Year):
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*Note:* The amount due may be increased as a result of additional interest, penalties, and other costs being assessed by the Creditor Agency.

**Section 1. ORDER.** YOU, the Employer, are hereby ORDERED to deduct from all disposable pay paid by you to the Employee the Wage Garnishment Amount described in Section 2 of this Order. You are ordered to begin deductions on the first pay day after you receive this Order. If the first pay day is within 10 days after you receive this Order, you may begin deductions on the second pay day after you receive this Order. You are ordered to continue deductions until you receive notification from the Creditor Agency to suspend or discontinue deductions. YOU are further ORDERED to pay the Creditor Agency all Wage Garnishment Amounts deducted by you under

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*Notice to Federal Agencies:* Complete instructions to Federal Agencies preparing Administrative Wage Garnishment forms may be obtained from the Financial Management Service's web site at <http://www.treas.gov/debt>

this order within three (3) business days of the withholding. Employers are encouraged to make payments electronically, if possible, as follows:

16. ABA Routing No.:	17. Account No.:	18. Agency Location Code (ALC) No.:
19. Account Title:	20. Other information required (i.e., tracking no., debtor name, etc.):	

Otherwise, mail checks (postmarked with 3 business days of the withholding) to:

21. Mailing address for check payments:
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**Section 2. WAGE GARNISHMENT AMOUNT.**

(a) The Wage Garnishment Amount is \$ \_\_\_\_\_ per pay period in accordance with an agreement between the Creditor Agency and the Employee.

-OR-

(b) The Wage Garnishment Amount for each pay period is the lesser of:

(1) \_\_\_\_\_ % of the Employee's disposal pay (*not to exceed 15%*);

(2) the garnishment amount set forth in 15 U.S.C. 1673(a)(2) (the amount by which the employee's disposable pay exceeds an amount equivalent to 30 times the minimum wage); OR

(3) 25% of the Employee's disposable pay less the amounts withheld under the withholding orders with priority. A withholding order with priority is a valid, legally enforceable withholding order that either (1) was received by the Employer prior to this Order, or (2) is an order for family support regardless of date received. Upon termination of any withholding order with priority or upon receipt of an order for family support subsequent to the receipt of this Order, the amount withheld for this order shall be recalculated based on the formula described in this Section 2(b).

**Note: The Employer may use the attached Wage Garnishment Worksheet to calculate the Wage Garnishment Amount.**

**CREDITOR AGENCY CERTIFICATION.** The **CREDITOR AGENCY** hereby certifies that this Order is issued in accordance with the requirements of 31 U.S.C. § 3720D and 31 C.F.R. § 285.11 and is mailed to the Employer on the date shown above.

\_\_\_\_\_  
CREDITOR AGENCY SIGNATURE

Title: \_\_\_\_\_

Print Name: \_\_\_\_\_

## WAGE GARNISHMENT WORKSHEET (SF-329C)

**Notice to Employers:** The Employer may use a copy of this Worksheet each pay period to calculate the Wage Garnishment Amount to be deducted from a debtor's disposable pay. Disposable pay includes, but is not limited to, salary, overtime, bonuses, commissions, sick leave and vacation pay. **If section 2(a) of the Wage Garnishment Order specifies the dollar amount to be garnished, the employer does not need to complete this Worksheet.**

Debtor Name _____
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Social Security Number _____
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**Pay Period Frequency (Select One):**

• Weekly or less   • Every other week   • Two times per month   • Monthly   • Other (Specify: \_\_\_\_\_)

### DISPOSABLE PAY COMPUTATION

1.	Gross Amount paid to Employee		
2.	Amounts Withheld:		
	a. Federal income tax		
	b. F.I.C.A. (social security)		
	c. Medicare		
	d. State tax (including income tax, unemployment, disability)		
	e. City/Local tax		
	f. Health insurance premiums		
	g. Involuntary retirement or pension plan payments		
3.	Total allowable deductions [Add lines a - g]		
4.	<b>DISPOSABLE PAY</b> [Subtract line 3 from line 1]		

### WAGE GARNISHMENT AMOUNT COMPUTATION

**If the Employee's wages are not subject to any withholding orders with priority, skip to line 8.**

5.	25% of Disposable Pay [Multiply line 4 by .25]	
6.	Total Amounts Withheld Under Other Wage Withholding Orders with Priority. See section 2(b) of the Order.	
7.	Subtract line 6 from line 5 [If line 6 is more than line 5, enter zero]	
8.	Multiply the percentage from section 2(b)(1) of the Order by line 4. (The percentage from section 2(b)(1) of the Order may not exceed 15%). <u>Example:</u> If the percentage from section 2(b)(1) of the Order is 15%, multiply .15 by line 4.	
9.	Amount equivalent to 30 times the Federal Minimum wage (\$5.15) If the employee is paid <u>Line 9 is</u> If the employee is paid <u>Line 9 is</u> Weekly or less    154.50    2x per month    334.75 Every other week    309.00    Monthly    669.50	
10.	Subtract line 9 from line 4 [if line 9 is more than line 4, enter zero]	
11.	<b>WAGE GARNISHMENT AMOUNT</b> Line 7, 8, or 10, whichever amount is the smallest	

## EMPLOYER CERTIFICATION (SF-329D)

**NOTICE TO EMPLOYERS: THE EMPLOYER MUST COMPLETE AND RETURN THIS CERTIFICATION TO THE CREDITOR AGENCY WITHIN 20 DAYS OF RECEIPT.**

***To be completed by Creditor Agency:***

Date of this Order:	Date Mailed to Employer:	Creditor Agency Tracking No.:
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Creditor Agency:	Creditor Agency Mailing Address (include street address, city, state, zip code):
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Employee Name:	Employee Social Security No.:
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***The remainder of the Employer Certification is to be completed by Employer:***

Employer:	Employer Taxpayer Identifying Number:
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*Note: The employer Taxpayer Identifying Number, required by 31 U.S.C. § 7701(c), will be used to collect and report any delinquent amounts owed by the Employer under this Order.*

1. The Employer received the Wage Garnishment Order concerning the above named employee on \_\_\_\_\_  
(Date)

2. Check one of the following:

- a. \_\_\_\_ The above named Employee is currently employed with this Employer, or
- b. \_\_\_\_ The above named Employee is no longer employed by this Employer.

*Please provide the following information for employees no longer employed:*

Employment Termination Date:	Employee's current employer (if known):
Employee's last know address and telephone no. (if known)	

**Note: If the Employee is no longer employed with this Employer, the Employer does not need to complete the rest of this Certification. Sign and date this Certification on page 2 and return to the Creditor Agency.**

\* \* \* \* \*

***Notice to Federal Agencies:*** Complete instructions to Federal Agencies preparing Administrative Wage Garnishment forms may be obtained from the Financial Management Service's web site at <http://www.treas.gov/debt>

3. Please provide the following information for the **current pay period only**. Or, you may attach a copy of a completed Wage Garnishment Worksheet to this Certification:

Gross amount paid to Employee (indicate whether hourly, weekly, annually, etc.)	Wage Garnishment Amount:
\$	\$

4. If the Employee's wages are subject to withholding orders with priority, please complete the following: A withholding order with priority is one received by the employer prior to this Order or an order for family support received at any time. Upon termination of the family support or prior withholding order, the amount withheld for this Order shall be increased.

List All Withholding Orders With Priority	Date Served On Employer	Approx. Date Withholding Expected to End (if known)

The person signing below hereby certifies that he or she is a duly authorized representative of the Employer, and that the above information is accurate to the best of his or her knowledge and belief.

\_\_\_\_\_  
SIGNATURE OF EMPLOYER REPRESENTATIVE

\_\_\_\_\_  
DATE

Print Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_