



EMPLOYER:
REK DESIGN & PRINT
PO BOX 4385
WINTER PARK, FL 32793

STUDENT LOAN DEBT OF EMPLOYEE:
MARRERO, KEVIN E

ACCOUNT NUMBER: 456972995
Total Amount Currently Owed: \$1,549.25

**SECOND ORDER OF WITHHOLDING FROM EARNINGS
ISSUED ON 01/11/2016**

On 11/23/2015, the Florida Department of Education, Office of Student Financial Assistance (OSFA) issued an Order of Withholding from Earnings for debtor (SSN: 599245697) requiring the employer to **DEDUCT AND PAY** to OSFA from the debtor's wages the smallest of --

- **The amount specified in this order, or**
- **Fifteen percent (15%) from the debtor's disposable pay** for each pay period (not to exceed 15% of the debtor's disposable pay), or
- The amount permitted by 15 U.S.C. 1673, unless the debtor provides OSFA with written consent to deduct a greater amount.

OSFA records indicate this organization employs this debtor. OSFA records also indicate that as of the date of this Second Order of Withholding from Earnings, we have not received the wage withholding payments the employer is required to make.

Section 488A of the Higher Education Act of 1965, as amended, states OSFA may sue any employer who fails to withhold wages after receipt of an Order of Withholding from Earnings. If OSFA is forced to file suit, it is entitled to seek not just the amount an employer fails to withhold, but also attorneys' fees, costs and punitive damages. Unless your withholding payment is received by OSFA within 30 days after the issuance of this Second Order, OSFA must review this matter for possible legal action.

If the debtor referenced in the Order of Withholding from Earnings is no longer employed by this organization, you must complete and return the enclosed Employer Acknowledgement of Wage Withholding form to OSFA **immediately** to preclude liability for failure to comply and release the Order of Withholding from Earnings.

If you have not sent in a wage withholding payment for this debtor because the debtor's next pay period following the issuance of the Order of Withholding from Earnings has not yet occurred, you must complete and return the pay period information on the Employer Acknowledgement of Wage Withholding form to OSFA immediately.

If you have already made the wage withholding payment(s) for this debtor, please contact our Customer Service Unit staff by calling toll-free at 1-800-262-6732 to confirm that the payment was received.

Method of Payment:

Employer is **DIRECTED TO PAY all amounts withheld** on each regular payday, no less frequently than once each month, to the address below or online at <http://www.FloridaStudentFinancialAid.org>.

Florida Department of Education
Administrative Wage Garnishment Unit
Post Office Box 277412
Atlanta, GA 30384-7412

All payments MUST identify the debtor and the debtor's account number.

The Administrative Wage Garnishment Employer Handbook is available online at http://www.floridastudentfinancialaid.org/FFELP/ffelp_homepage.html. If you are unable to access this information online, please contact our Customer Service Unit staff by calling the number listed above.

Should you have any questions or concerns regarding this Second Order, or the wage withholding process, please contact our Customer Service Unit staff by calling the number listed above or e-mail the Administrative Wage Garnishment Unit staff at Wage.Questions@fldoe.org.



OFFICE OF STUDENT FINANCIAL ASSISTANCE

STUDENT LOAN DEBT OF _____, DEBTOR
EMPLOYER IDENTIFICATION NUMBER (EIN) _____

EMPLOYER ACKNOWLEDGEMENT OF WAGE WITHHOLDING

I, _____ on behalf of _____
(Name) (Employer)
acknowledge receipt of the Order of Withholding from Earnings for _____
(Debtor)

(Debtor's Account Number)

You must complete the Administrative Wage Garnishment Withholding Worksheet
on the reverse side of this form before you complete the section below.

Please check all that apply:

- ☐ The above-named debtor is an employee of this organization and payments of approximately \$ _____
(amount on the order, up to 15 percent of disposable pay* or amount permitted by 15 U.S.C. 1673) will be forwarded to the
Florida Department of Education on a _____ (weekly/biweekly/other) basis.
- ☐ The above-named debtor is an employee of this organization; however, he/she is currently being garnished at _____ %.
Therefore, our organization will send payments of approximately \$ _____ on a _____
(weekly/biweekly/other) basis.
- ☐ The above-named debtor of this organization has an insufficient garnishment amount and no monies will be remitted.
- ☐ The above-named debtor of this organization is ineligible for wage garnishment for the following reason(s): _____
- ☐ The above-named debtor is no longer employed or has never been employed by this organization.
Type of Termination: Voluntary _____ Involuntary _____
Debtor's Subsequent Employer and Telephone Number (if available): _____
- ☐ The address this organization has for this debtor is different from the address listed on the Order of Withholding from
Earnings. Our records indicate the address is: _____

(Employer Signature)

(Employer Telephone Number)

(Date)

(Employer Fax Number)

(Employer Email Address)

PLEASE RETURN THIS FORM WITHIN 20 BUSINESS DAYS TO THE CORRESPONDENCE ADDRESS OR FAX
NUMBER BELOW.

Correspondence Address:

Florida Department of Education
Office of Student Financial Assistance
Administrative Wage Garnishment Unit
Post Office Box 7019
Tallahassee, FL 32314-7019
Fax Number: (850) 410-6849

Payment Address:

Florida Department of Education
Administrative Wage Garnishment Unit
Post Office Box 277412
Atlanta, GA 30384-7412

www.FloridaStudentFinancialAid.org

Post Office Box 7019, Tallahassee, Florida 32314-7019
800-366-3475/850-410-5200

***Disposable pay**—part of an employee's weekly, biweekly, etc. compensation for personal services that remains after the deduction of health insurance premiums and any amounts required by law to be withheld; includes, but is not limited to: salary, bonuses, commissions or vacation pay.

Amounts required by law to be withheld—Social Security taxes and withholding taxes; not any amount withheld under a court order or other Administrative Wage Garnishment order.

ADMINISTRATIVE WAGE GARNISHMENT WITHHOLDING WORKSHEET

For the _____ pay period ending _____.
(type) (date)

1. Enter employee's disposable pay. 1. \$ _____
2. Multiply the amount in Line 1 by 15% (.15). 2. \$ _____
3. Multiply the amount in Line 1 by 25% (.25). 3. \$ _____
4. Enter the applicable federal minimum hourly wage. 4. \$ _____
5. Multiply the amount in Line 4 by 30 (weekly). 5. \$ _____
Multiply the amount in Line 4 by 60 (biweekly).
Multiply the amount in Line 4 by 65 (semimonthly).
Multiply the amount in Line 4 by 120 (monthly).
6. Subtract Line 5 from Line 1. 6. \$ _____ *
7. Enter the sum of all other garnishments being withheld from disposable pay. 7. \$ _____
8. Subtract Line 7 from Line 3. 8. \$ _____ *
9. Subtract Line 7 from Line 6. 9. \$ _____
10. Enter the lesser of Lines 2, 8 or 9. 10. \$ _____
11. Remit the amount entered on Line 10.
(Make check payable to: Florida Department of Education and identify the debtor and the debtor's account number.)

*** IF THIS AMOUNT IS ZERO OR LESS, NO REMITTANCE IS REQUIRED FOR THIS PAY PERIOD.**