

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	LEVYING OFFICER (Name and Address)
TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name):	FAX NO.:
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	COURT CASE NUMBER:
NOTICE OF TERMINATION OR MODIFICATION OF EARNINGS WITHHOLDING ORDER	
LEVYING OFFICER FILE NUMBER:	

1. TO EMPLOYER: You are given notice that the Earnings Withholding Order is modified as follows:

Name and address of employer Name and address of employee

Attn: Social Security No. on form WG-035 unknown

(Insert name above)

2. THE EARNINGS WITHHOLDING ORDER IS

a. terminated for all earnings payable on or after
(date):

b. modified for all earnings payable on or after
(date): , as follows:

(1) The sum to be withheld is (specify amount as weekly, monthly, etc.):
\$

The amount withheld must not exceed the maximum permitted by law, as explained in the Employer's Instructions.

(2) The sum necessary for the support of the judgment debtor and family is (specify amount as weekly, monthly, etc.):
\$

All disposable earnings exceeding that amount are to be withheld, but the amount withheld must not exceed the maximum permitted by law, as explained in the Employer's Instructions.

c. Other orders (specify):

3. Withheld earnings presently in your possession should be paid in accordance with the terms of this notice.

Date:

Levy Officer, by
(TYPE OR PRINT NAME)



(SIGNATURE)

CREDITOR'S INSTRUCTION TO TERMINATE OR MODIFY EARNINGS WITHHOLDING ORDER

To the levying officer: You are directed to terminate or modify the Earnings Withholding Order as indicated above.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE)

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