

Reference Payroll Procedures
 Manual Section H 300

**NOTE: SUBMIT ORIGINAL TO THE STATE CONTROLLER'S GARNISHMENT UNIT.
 IF FAXED, FAX ONLY ONCE AND DO NOT SUBMIT A HARD COPY.**

DOCUMENT NUMBER

1. AGENCY NAME Your Agency or Department's Name		4. POSITION NUMBER (Agency) (Unit) (Class) (Serial) Employee's Current Position Number	
2. SOCIAL SECURITY NUMBER Employee's SSN	3. NAME (F.I.) (M.I.) (LAST) Employee's First Initial, Middle Initial, Last Name		
5. EFFECTIVE DATE	6. ACTION TYPE <input type="checkbox"/> NEW <input type="checkbox"/> MODIFICATION OR CORRECTION OF ITEM <input type="checkbox"/> CANCELLATION OF GARNISHMENT ORIGINAL EFFECTIVE DATE		
7. PAY FREQUENCY <input type="checkbox"/> MONTHLY <input type="checkbox"/> SEMI-MONTHLY <input type="checkbox"/> BI-WEEKLY			
8. GARNISHMENT TYPE (038) A. <input type="checkbox"/> COURT ORDERED ASSIGNMENT OF WAGES (ONGOING SUPPORT) (FC 150 et seq., 5200 et seq. or PC 3088) \$ _____ (Monthly Amount) <input type="checkbox"/> DEDUCTION AMOUNT CHANGED FROM \$ _____ (Deduction Amount per Pay Period) \$ _____ (Must be completed if changing 8A)		9. TOTAL GARNISHMENT AMOUNT \$ _____	
B. (339/002) EARNINGS WITHHOLDING ORDER FOR SUPPORT - ARREARAGES (CCP Section 706.030, 706.052, and 706.070 et seq.) (including FTB Child Support Collection Program, Revenue & Taxation Code 19271) <input type="checkbox"/>		\$ _____	
C. (339/003) CERTIFICATION OF FACTS - FEDERAL TAX LEVY (GC 926.8) (1) NUMBER OF DEPENDENTS (Must be at least one for employee) <input type="checkbox"/> 1 - SINGLE <input type="checkbox"/> 3 - MARRIED FILING SEPARATELY <input type="checkbox"/> 2 - MARRIED FILING JOINTLY <input type="checkbox"/> 4 - HEAD OF HOUSEHOLD <input type="checkbox"/> 5 - SURVIVING SPOUSE		\$ _____	
D. (339/004) EARNINGS WITHHOLDING ORDER FOR STATE TAXES (CCP 706.072); FTB REGISTRATION COLLECTION PROGRAM (Revenue & Taxation Code 10878); FTB STUDENT LOAN COLLECTIONS (GC 16583.5); BOARD OF EQUALIZATION FOR TAXES (CCP 706.074); UNEMPLOYMENT INSURANCE (UI Code 1755); FTB COURT-ORDERED DEBT COLLECTIONS (Revenue & Taxation Code 19280) <input type="checkbox"/>		\$ _____	
E. (339/007) EARNINGS WITHHOLDING ORDER (CCP 706.125) <input type="checkbox"/>		\$ _____	
F. (339/008) Federally Guaranteed Student Loan (Higher Education Act of 1965: 20 USCA Section 1095a.) <input type="checkbox"/>		\$ _____	
10. SUM OF ALL AMOUNTS DUE AND OWING THIS AGENCY BY DEBTOR FOR SALARY ADVANCES OR FOR ANY OTHER PURPOSE. <input type="checkbox"/>		\$ _____	
11. COMPLETE ONLY IF COURT SPECIFICALLY STATES (May only be completed with 8B, 8C, 8D, 8E, and 8F.)			
A. <input type="checkbox"/> TERMINATION DATE OF EARNINGS WITHHOLDING ORDER (NOT APPLICABLE TO 8D)			
B. <input type="checkbox"/> MAXIMUM GARNISHMENT AMOUNT DEDUCTIBLE PER MONTH (If 11B is used for 8C, copy of IRS Form 668D must be attached.) \$ _____			
C. <input type="checkbox"/> SUPPORT EXEMPTION AMOUNT \$ _____			
D. <input type="checkbox"/> SPECIFIC AMOUNT TO BE DEDUCTED PER MONTH (If 11D is used for 8C, copy of IRS Form 668D must be attached.) \$ _____			
12. WARRANT TO BE MADE PAYABLE TO Must be completed Levying Officer File Number / Case Number			
Enter Levying Officer File Number for warrants payable to Sheriff's Office or Marshal's Departments (8B and 8E above). All others, enter Case Number.			
INDICATE NAME SHOWN ON COURT ORDER, WRIT, LEVY. (Include address if pursuant to FC 150 et seq., 5200 et seq. or PC 3088)			
NOTE: Item 12; Levying Officer is the name of the person who will receive the garnishment amount. This information is on the court order.			
13. REMARKS This section is to be used by your Agency/Department for any additional information that you wish for SCO to know.			
14. FORM COMPLETED BY Personnel Specialist's Printed Name		TELEPHONE NUMBER AND EXTENSION Number of Person Who Completed Form	15. PAYROLL INFORMATION CERTIFIED IN ACCORDANCE WITH B/C RULE 633.7 AUTHORIZED SIGNATURE DATE Personnel Specialist's or Supervisor's Signature Date Signed
			TYPED NAME Fill out only if Item 14 and Item 15 are different people

NOTE: Employee name must match the name on the EAR for the garnishment to be correct.

Ten days after the date the order was received by your Agency/Department.

Reference the employee's pay frequency for this information.

Check the box in Item 8A [Deduction Code: 038] for ongoing support ONLY (out-of-state child support or spousal support).

FOR ALL EMPLOYEES YOU MUST Complete Monthly Amount (Item 8A).

MONTHLY EMPLOYEES

Modification: 'Deduction Amount Changed From' must be OLD monthly deduction. NEW monthly deduction must go under 'Monthly Amount.'

Cancellation: Complete Item 8A with the 'Monthly Amount' to be canceled.

NOTE: You must also complete the 'Deduction Amount per Pay Period' for a new garnishment, a modification, and a cancellation.

SEMI-MONTHLY

New garnishment: Complete Item 8A with the semi-monthly amount under 'Deduction Amount per Pay Period.'

Modification: 'Deduction Amount Changed From' must be OLD monthly deduction. NEW monthly deduction must go under 'Monthly Amount.'

Cancellation: Complete Item 8A with the 'Monthly Amount' to be canceled.

NOTE: You must also complete the 'Deduction Amount per Pay Period' for a new garnishment, a modification, and a cancellation.

BI-WEEKLY

New garnishment: Complete Item 8A with the bi-weekly amount under 'Deduction Amount per Pay Period' (See example at bottom for more information).

Modification: 'Deduction Amount Changed From' must be OLD monthly deduction. NEW monthly deduction must go under 'Monthly Amount.'

Cancellation: Complete Item 8A with the 'Monthly Amount' to be canceled.

NOTE: You must also complete the 'Deduction Amount per Pay Period' for a new garnishment, a modification, and a cancellation.

EXAMPLE: If Item 8A is \$300.00 per month, the deduction amount is determined by the employee's pay frequency as follows:

MONTHLY	\$300 X 12 ÷ 12 = \$300
SEMI-MONTHLY	\$300 X 12 ÷ 24 = \$150
BI-WEEKLY	\$300 X 12 ÷ 26 = \$138.46

Glossary

Arrearages / Arrears: Otherwise known as Past Due

Cancellation: Otherwise known as Suspension, Termination, Withdrawal

Modification: Otherwise known as Amendment, Correction

On-Going Support: Otherwise known as Current

NOTE: This form can be faxed to (916) 323-3449.

Select NEW if it is establishing a new order.

Select **Modification/Correction** only if dollar amounts are changing (ex: increasing/decreasing from original order).

NOTE: Must use original effective date.

Cancellation is used ONLY to remove the garnishment from the payroll system. When canceling, Item 5 is used as the Date of Termination (Item 6 is now used as the original effective date).

NOTE: When canceling you must show the garnishment type and the dollar amounts that are applicable. Do not leave blank or enter \$0.00.

NOTE: Do not use modification to cancel a garnishment.

Item 9: Enter the total amount due to the owing agency (if the total amount is not entered on the court order, please enter \$99,999.99 as a generic placeholder).

Item 8B: [Deduction Code: 339/002] Out-of-state arrears or spousal support. Check the box in Item 8B for Arrearages ONLY.

Item 8C (1) & (2): [Deduction Code: 339/003] Must be completed from IRS Form 668-WC (if employee doesn't complete the form within 3 days, complete as married filing separately with 1 dependent). Do not use the employee's EAR information.

Item 8D: [Deduction Code 339/004] State taxes (FTB), BOE taxes.

Item 8E: [Deduction Code: 339/007] Ordinary money judgment order.
Example: Sheriffs, Social Security, EDD, Department of Treasury.

Item 8F: [Deduction Code: 339/008] Student loans.

Item 10: Can only be used to allow the agency to collect money prior to a garnishment amount being deducted. The STD 639 cannot be used for the sole purpose of collecting a salary advance. This must be collected at the agency level.

FOR ALL ACTION TYPES

Items 11A and 11C are not applicable. Leave blank.

Complete Item 11B or Item 11D with the maximum/specific amount that should be deducted per month.

Use Item 11B if your employee has a fluctuating disposable earnings each month. Item 11B specifies an absolute maximum to be deducted. The garnishment will not go over this amount. **NOTE:** When using Item 11B with Item 8C, you must complete the 'Number of Dependents' and 'Standard Deductions.'

Use Item 11D if your employee's pay is stable. It is YOUR responsibility to calculate the garnishment amount and ensure that your employee will not be over-garnished. The system will take the amount specified without any calculations on disposal earnings.