

REQUEST FOR PAYROLL ORDER

(Fill out ONLY for Debtor
who is requesting payment to come from paycheck)

Date: _____

TO: CHAPTER 13 TRUSTEE

Chapter 13 Case #: _____

Debtor's Name: _____

Address: _____

Telephone: (_____) _____

Attorney for Debtor:

Henze & Associates, P.C.

12510 E. Iliff Ave., Suite 110

Aurora, CO 80014

Tele: (303) 830-2811

Fax: (720) 744-0811

The above named debtor hereby requests that the monthly Chapter 13 payment in the amount of \$_____ be made by payroll deduction from the paychecks of: _____ (husband / wife) (please circle one) with a Social Security Number of XXX-XX-_____. (last 4 digits only).

The Payroll Order generated by this request will be sent to your employer at the address below:

Employer Name: _____

Address: _____

Attention: _____

Employer telephone: (_____) _____ FAX: (_____) _____

I understand that I am responsible for making the plan payments until the payroll order takes effect. I also understand that if I change employment, I must resume making all plan payments. I additionally understand that it is my responsibility to inform my employer and the trust of any plan amendments or changes in the amount of the plan payments during the term of my plan **and to independently make my bankruptcy plan payments whenever the need arises.** I further understand that if I want a payroll order issued from the court I must return this form to the Trustee. In addition, I acknowledge that my employer will determine when deductions are withheld from my payroll checks.

I hereby verify that I am requesting a payroll order as described above and agree with all the terms of this request.

Signature

Print Name