	Plaintiff(s)		
)		
	vs.		
	Defendant(s))	Gen No	
)	Return Date:	
	and)	21 to 40	days after the issuance of summons
) Employer)		
		E DEDUCTION ORDER	
	on oath sta		•
1. Ib	elieve employer		_ is indebted to the judgment debtor
_			
_ En	nployer's address is:		for wages due or to become due
	ne last known address of the judgment debtor is: _		
	io last taleani adaleses of the judgillent design is		
was mailed			
Prepared b	Pro Se □ □	Under penalty	of perjury as provided by law pursuant
	F10 3e 🗆 🗆	to 735 ILCS 5	/1-109 the affiant certifies that the
	State:	statements se	et forth herein are true and correct.
Phone:	Zip Code:		
E-mail add	lress:		
	CERTIFICATE OF ATTORNE	Y OR JUDGMENT CRE	DITOR
I, the unde is true:	Attorneys must also submit a copy of the underlying judgment or ersigned certify under penalties as provided by law	or a certification by the clerk of pursuant to 735 ILCS 5/	the court that entered the judgment. 1-109 that the following information
1.	Judgment in the above captioned case was ente The amount of Judgment was:	red on the day of	, (Voor)
2. 3.	Allowable costs previously expended:	Φ	(lear)
	a. Initial filing fee	\$	
	b. Original and alias summons	\$	
	c. Filing and summons cost of prior supplementa	ary proceeding\$	
4.	Filing and summons cost for this proceeding	\$	
5.	Statutory interest due on Judgment from date ab	ove\$	
		T∩T∆I ¢	
DEDUCT:	Total amount paid by or on behalf of the judgment	: debtor	
	prior to this proceedings		
R∆I ∆N∩⊏	DUE JUDGMENT CREDITOR	\$	
DALAINOL	DOL GODOWILLY ONEDITOR	Ψ	
		Attorney or	Judgment Creditor

		Plaintiff(s))	
	VS.))	
)	
		Defendant(s)) Gen No	
) Return Date:	
and		Employer)	
			/ TO WAGE DEDUCTION PROCEEDINGS	
			_ certifies that the following Answer is true	and correct to the
best of her/his know	wledge and belief	concerning the prope	erty of the judgment debtor:	
Debtor Name:		Last Fo	ur Digits of Soc. Security No	
Do you pay monies	to the judgment	debtor listed above?	☐ Yes ☐ No	
State whether any t	funds paid to the	debtor are for disabili	ty, retirement or are in any other way exem	nnt or not subject to
•	•			
			week(s) or	month(s)
	CALCUI	LATION TO DETERM	MINE AMOUNT OF WITHHOLDING:	
				•
_			ensions or retirement plan is	
B. Method I – Method II	15% OI A =			. В.
·	ter Total FICA St	ate and Federal tax a	and Medicare	C
			ind Medicale	
			ll minimum or IL minimum, whichever is greater)	
			ction	
J. Subtract Employer's Statutory Fee (735 ILCS 5/12-814) 2% of amount				
			Judgment Debtor)	
K. Amount to	be applied to judg	gment		.K
	ount to be withhe further order of C		aycheck as of the date of service of Summ	nons and not
I, the undersigned	certify under pena	ılties as provided by l	aw pursuant to section 1-109 of the Code	of Civil Procedure o
the Illinois Compile	d Statutes that the	e statements set forth	in this instrument are true and correct.	
			Signature of Employer	
			J	

INSTRUCTIONS

- 1. A copy of this Answer shall be:
 - a. E-filed with the Clerk of the Circuit Court of Lake County at https://www.lakecountycircuitclerk.org/e-filing.
 - b. Mailed to the attorney for the Plaintiff. If the Plaintiff is not represented by an attorney, then mail it directly to the Plaintiff.
 - c. Mailed to the Defendant.
- 2. You will receive a copy of a Court Order instructing you how to proceed and where to send deducted funds.

Employer/Agent:
Agent Name:
Employer Name:
Address:
Phone
Fax