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ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):   TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT:	
<b>WAGE AND EARNINGS ASSIGNMENT ORDER FOR SPOUSAL SUPPORT</b> <input type="checkbox"/> <b>Modification</b>	CASE NUMBER:

**TO THE PAYOR: This is a court order.** You must withhold a portion of the earnings of (*Obligor's name and date of birth*):

and pay as directed below. (*An explanation of this order is printed on the reverse.*)

**THE COURT ORDERS YOU TO**

1. Pay part of the earnings of the employee or other person ordered to pay support as follows:
  - a.  \$ \_\_\_\_\_ per month current **spousal support**
  - b.  \$ \_\_\_\_\_ per month **spousal support arrearages**
  - c. TOTAL DEDUCTIONS PER MONTH:
2.  The payments ordered under item 1 a shall be paid to (*name, address*):
3.  The payments ordered under item 1 b shall be paid to (*name, address*):
4. The payments ordered under item 1 shall continue until further written notice from the payee or the court.
5.  This order modifies an existing order. **The amount you must withhold may have changed.** The existing order continues in effect until this modification is effective.
6. This order affects all earnings payable beginning as soon as possible but not later than 10 days after you receive it.
7. Give the Obligor a copy of this order and the blank *Request for Hearing Regarding Wage and Earnings Assignment* (form 1299.28) within 10 days.
8.  Other (*Specify*):
9. For the purposes of this order, spousal support arrearages are set at: \$ \_\_\_\_\_ as of (*date*):

Date: \_\_\_\_\_

\_\_\_\_\_  
JUDICIAL OFFICER

(instructions and information on reverse)

