

**IN THE CIRCUIT COURT OF
THE TWENTY-THIRD JUDICIAL CIRCUIT
KENDALL COUNTY, ILLINOIS**

RETURN DATE _____

GEN. NO. _____

VS.

AND

DEFENDANT

PLAINTIFF(S)

EMPLOYER

INTERROGATORIES/ANSWER TO WAGE DEDUCTION PROCEEDINGS

Employer/Agent _____, certifies under penalty of perjury that the following Answer is true and correct to the best of his/her knowledge and belief concerning the property or the judgment debtor:

Debtor Name: _____ Soc. Sec. No. (Last Four Digits Only) _____

Do you pay monies to the judgment debtor listed above? Yes _____ No _____

State whether any funds paid to the debtor are for disability, retirement or are in any other way exempt or subject to other Court Order: _____

One Pay Period equals: _____ day(s) _____ week(s) _____ month(s)

CALCULATION TO DETERMINE AMOUNT OF WITHHOLDING:

(A) Gross Wages minus mandatory contributions to pension or retirement plans is (A) _____

(B) METHOD I - 15% or (A) = (B) _____

METHOD II

(C) Enter Total FICA, State and Federal Tax and Medicare (C) _____

(D) Subtract (C) from (A) = (D) _____

(E) Enter Minimum wage per pay period (45 x \$8.25 per week) (E) _____

(F) Subtract (E) from (D) = (F) _____

(G) Enter the lesser of line (B) or (F) (G) _____

(H) Enter Child Support or other Court Ordered Deduction (H) _____

(I) Subtract (H) from (G) = (I) _____

(J) Subtract Employer's Statutory Fee (§5/12 - 814) (J) _____

(K) Amount to be applied to judgment (K) _____

Line I is the amount to be withheld from employee's paycheck as of the date of service of Summons and not disbursed until further order of the Court.

Signature of Employer _____

INSTRUCTIONS

1. E-file a copy of this Answer to the Court and mail to Attorney for Plaintiff and give a copy to the Defendant.
2. You will receive a copy of a Court Order by fax or mailing instructing you how to proceed and where to send deducted funds.

Employer/Agent:

Agent Name _____

ROBYN INGEMUNSON

Employer Name _____

Clerk of the Circuit Court

Address _____

Kendall County Courthouse

City, State, Zip _____

807 W. John Street

Email Address _____

Yorkville, IL 60560

Phone _____

Fax _____

NOTE: E-file a copy of the Answer to the Court. Attorney for Plaintiff or Judgment Creditor and to the Defendant.