



State of Delaware  
 Office of State Court Collections  
 414 Federal St, Rm 175  
 Dover, DE 19901  
 (302) 739-1980

## Assignment of Wages

Case Number
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Employer:

Attn: Payroll Dept.
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RE: Employee (Defendant): \_\_\_\_\_

Social Security Number: \_\_\_\_\_

To Whom it May Concern:

The subject employee is indebted to the State of Delaware in the sum of \$\_\_\_\_\_ for fines, court costs and/or restitution. At the bottom of this form is an executed authorization by the employee for the deductions from the employee's wages.

You are therefore directed, under the provision of 11 Del. Code §4104c, to withhold \$\_\_\_\_\_ weekly from the wages of \_\_\_\_\_ (Employee) until the total sum of \$\_\_\_\_\_ has been deducted. Please forward that amount on a weekly, biweekly or monthly basis to the "State of Delaware" at one of the above referenced locations.

11 Del. Code §4104c also provides that an employer shall take no action against an employee who has executed an assignment of wages, and that the employer may not penalize that employee solely because of the assignment.

<b>Voluntary Assignment of Wages</b>	
<p>I _____, do hereby agree to make payments to the State of Delaware, Office of State Court Collections Enforcement in the amount of \$_____ weekly beginning <u>3/1/2024</u> on account(s) # _____ until the account(s) is/are paid in full.</p>	
<p>Defendant Name:          Defendant Address:</p>	
<p>Defendant Phone #:</p>	
Date: <u>3/1/2024</u>	Defendant Signature: _____

Attention: Payments are due on a regular basis. If payments are not received, a Contempt of Court Hearing will be scheduled immediately. Should the individual leave your employ, or you require any additional information, please contact the above referenced Office of State Court Collections Enforcement.