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WG-020

ATTORNEY *(Name, State Bar number, and address)*:	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO.: ATTORNEY FOR STATE TAX AGENCY	
NAME OF COURT: STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
APPLICATION OF *(Name)*: TAXPAYER / RESPONDENT	
APPLICATION FOR EARNINGS WITHHOLDING ORDER FOR TAXES	CASE NUMBER:
NAME OF STATE TAX AGENCY:	TAX AGENCY NUMBER:

THE STATE OF CALIFORNIA APPLIES FOR AN EARNINGS WITHHOLDING ORDER FOR TAXES

1. Employer *(name and address)*:

2. Employee-taxpayer *(name and address)*:

3. The amount of taxes, interest, and penalties owed is: $

4. The amount to be withheld each pay period is: $ This amount exceeds the sum that can be withheld administratively.

5. ☐ A *Temporary Earnings Withholding Order for Taxes* (form WG-024) was served on the employer on *(date)*:

6. ☐ The reason for this application is *(specify)*:

IMPORTANT NOTICE TO TAXPAYER/EMPLOYEE

A. The state tax agency named above has asked the court to order money withheld from your earnings to pay a tax liability. The amount due is shown in item 3.

B. The clerk of the court will send you a notice of the time and place of a court hearing. You have the right to appear at the hearing and ask for an exemption of up to seventy-five percent of your earnings.

C. A form called *Claim of Exemption and Financial Declaration (Wage Garnishment—State Tax Liability)* (form WG-026) is enclosed. To claim an exemption, complete that form. File it with the clerk of the court and mail a copy to the tax agency as soon as possible.

D. Keep a copy of the *Claim of Exemption and* take it with you to the court hearing.

E. If you wish to obtain the advice of an attorney, you should do so at once.

EMPLOYEE: KEEP THIS LEGAL PAPER ***EMPLEADO: GUARDE ESTE PAPEL OFICIAL***

(Proof of service on reverse)

Form Adopted for Mandatory Use
Judicial Council of California
WG-020 [Rev. January 1, 2007]

APPLICATION FOR EARNINGS WITHHOLDING ORDER FOR TAXES
(Wage Garnishment-State Tax Liability)

Code of Civil Procedure, §§ 706.075, 706.076
www.courtinfo.ca.gov

www.accesslaw.com

WG-020

APPLICATION OF *(Name)*: TAXPAYER / RESPONDENT	CASE NUMBER:

PROOF OF SERVICE BY MAIL

1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred.
2. My residence or business address is shown in the box labeled Attorney for State Tax Agency on the reverse.
3. I served the foregoing *Application for Earnings Withholding Order for Taxes* by enclosing a copy in an envelope addressed to the taxpayer as shown in item 2 on the reverse AND
   a. ☐ **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
   b. ☐ **placing** the envelope for collection and mailing on the date and at the place shown in item 4 below following our ordinary business practices. I am readily familiar with this business' practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. a. Date of deposit: b. Place of deposit *(city and state)*:
5. I served a *Claim of Exemption and Financial Declaration (Wage Garnishment—State Tax Liability)* (form WG-026) along with the foregoing *Application.*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

Print this Form