

**INFORMATION SHEET TO SET UP
PAYROLL DEDUCTION ORDER**

THE FOLLOWING INFORMATION WILL ENABLE THE TRUSTEE TO PREPARE A PAYROLL DEDUCTION ORDER SO THAT YOUR EMPLOYER WILL DEDUCT YOUR PLAN PAYMENT FROM YOUR WAGES AND MAIL THE PAYMENT TO THE TRUSTEE:

DEBTOR(S)' NAME: (LAST) _____ (FIRST) _____

DEBTOR(S)' CASE NUMBER _____

DEBTOR(S)' SOCIAL SECURITY NUMBER _____

DEBTOR'S EMPLOYER _____

EMPLOYER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT PERSON/DEPARTMENT, IF NECESSARY _____

OTHER RELEVANT INFORMATION _____

I, _____ hereby understand and acknowledge that I am responsible to make my bankruptcy payment in the form of certified funds (cashier's check or money order) directly to Kevin R. Anderson, Chapter 13 Trustee, until funds are deducted from my payroll advices. I also understand that I am ultimately responsible for said bankruptcy payments and that the Office of Chapter 13 Trustee is not responsible of said payments are not made.

DATED: _____
Debtor(s)

PLEASE RETURN THIS COMPLETED FORM TO:

KEVIN R. ANDERSON
CHAPTER 13 TRUSTEE
405 SOUTH MAIN STREET, #600
SALT LAKE CITY, UTAH 84111