# STATE TAX LEVY GARNISHMENT PAYROLL TRACKER

## EMPLOYEE INFORMATION

**Employee Name:**

**Employee ID / SSN:**

**State / Agency:**

**Case / Case ID:**

## LEVY TERMS & BALANCES

**Total Levy Amount:**

**Exempt Amount / Rate:**

**Withholding Limit %:**

**Effective Date:**

| PAY DATE | GROSS EARNINGS | DISPOSABLE INCOME | EXEMPT AMOUNT | LEVY WITHHELD | ADMIN FEE (IF ANY) | AMOUNT REMITTED | REMAINING BALANCE | CHECK / REF # |
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Prepared By (Payroll Administrator)

Authorized Signature & Date