

**STATE OF MICHIGAN
JUDICIAL DISTRICT
JUDICIAL CIRCUIT**

**ORDER CANCELING
ASSIGNMENT OF WAGES**

CASE NO.

Court address

Court telephone no.

In the matter of _____
Name of employee Last four digits of social security no. or employee ID no. Date of birth

Address City State Zip Telephone no.

1. On _____ this court entered an order directing _____
Date Name of employer
to withhold \$ _____ per _____ from the earnings owed the person named above.

THE COURT FINDS:

2. Assignment of wages is unnecessary because voluntary payments are being made. the debt has been satisfied.

IT IS ORDERED:

3. The assignment of wages of the person named above is canceled.

Date

Judge Bar no.

CERTIFICATE OF MAILING

I certify that on this date copies of this order were served on the employee and employer by first-class mail to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature