



Cumberland County Court Administration

Court Collections Unit

One Courthouse Square . Suite 308 . Carlisle, PA 17013 . 717.240.7340 . courtcollections@cumberlandcountypa.gov

WAGE ATTACHMENT

I, _____, the undersigned, hereby agree and authorize my employer,
_____, to deduct from my wages the sum of
\$_____per pay and remit that amount to:

**Clerk of Court
1 Courthouse Square, Room 205
Carlisle, PA 17013**

This amount is to be applied to my costs, fines, and restitution.

Total Amount Due: \$_____ Docket number(s): CP-21-_____;
_____; _____;

Defendant

ACCEPTANCE

I, _____, of _____, being the
employer of _____, hereby agree to accept the above
Wage Assignment by making said deductions from his/her wages and remitting that amount to
the office and address stated above. I understand that this assignment will be effective only
during such time as the individual named above is employed by me and I shall in no way be
obligated should he/she leave employment.

Dated: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____