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| ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> TELEPHONE NO.: _____ FAX NO.: _____ E-MAIL ADDRESS: _____ ATTORNEY FOR <i>(Name):</i> _____ | DATE RECEIVED BY COURT <i>(Do not file in public court file.)</i> |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF : STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: | |
| PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT: | COURT CASE NUMBER: |
| <p style="text-align: center;">CONFIDENTIAL STATEMENT OF JUDGMENT DEBTOR'S SOCIAL SECURITY NUMBER (Supplement to Wage Garnishment Forms WG-001, WG-002, WG-004, WG-005, WG-009, WG-012, and WG-030)</p> | LEVYING OFFICER FILE NUMBER: |

(Do not attach to forms.)

This separate *Confidential Statement of Judgment Debtor's Social Security Number* contains the Social Security number of the judgment debtor for whom an earnings withholding order is being sought or has issued in the case referenced above. **This supplement must be kept separate from any applications or orders filed in this case, and should not be a public record.**

INFORMATION ON JUDGMENT DEBTOR:

1. Name:
2. Social Security Number:

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| <p>TO COURT CLERK THIS STATEMENT IS CONFIDENTIAL. DO NOT FILE THIS CONFIDENTIAL STATEMENT IN A PUBLIC COURT FILE.</p> |
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