

**Pamela Simmons-Beasley**  
**Chapter 13 Trustee**  
**250 Berryhill Road, Suite 402**  
**Columbia, South Carolina 29210**  
**(803) 779-5180**

**PAYROLL DEDUCTION AUTHORIZATION**

Case Number: \_\_\_\_\_

I consent to Pamela Simmons-Beasley, the chapter 13 trustee, requesting a payroll deduction order from the Bankruptcy Court so that my bankruptcy plan payments will be drafted from my paycheck(s). I understand that I am ultimately responsible for my bankruptcy plan payments and any shortfall in payments that occurs even if this payroll deduction order is issued. I understand that it is my responsibility to update the Trustee with my employment information, and to contact my employer if my employer is not taking the payments out and/or is not sending the funds to the Trustee.

I consent to the wage order beginning immediately.

Debtor 1: \_\_\_\_\_  
Printed Name

Debtor 2: \_\_\_\_\_  
Printed Name

**X** \_\_\_\_\_  
Signature of Debtor 1

**X** \_\_\_\_\_  
Signature of Debtor 2

Date: \_\_\_\_\_

Date \_\_\_\_\_

The payroll deduction should take deductions as follows:

- ☐ Debtor 1    Percentage of plan payment to be deducted: \_\_\_\_\_  
☐ Debtor 2    Percentage of plan payment to be deducted: \_\_\_\_\_  
☐ Other: \_\_\_\_\_

Debtor 1 Employer

Debtor 2 Employer

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Contact  
Person/Department: \_\_\_\_\_

Contact  
Person/Department: \_\_\_\_\_

Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_