



OFFICE OF THE COMPTROLLER

CHANGE TO EXISTING GARNISHMENT ORDER FORM

INSTRUCTIONS

To make a change to an existing garnishment, complete this form, attach a copy of the legal documentation that authorizes the change, and send it to:

Office of the Comptroller

Statewide Payroll Team

1 Ashburton Place, 9th Floor

Boston, MA 02108

FAX: (617) 727-2163

Employee Name	Employee ID
Garnish ID	Garnishment Amount
Garnishment Payee	
Change Type Please indicate what type of change to be made <input type="checkbox"/> Status Change Completed, Suspended <input type="checkbox"/> Amount/Percent Change	

Change of Status Request Submitted By	
Name	Phone
Department	Date

For Office of the Comptroller Use Only
Date Change Request Received
Date Change was entered into HR/CMS
Name of Person Entering Change