

[Company Name]
[Payroll Department Address]
[City, State, Zip Code]

[Date]

[Federal Agency Name]
[Department/Division]
[Agency Address]
[City, State, Zip Code]

RE: Notice of Garnishment Compliance

Employee Name: [Employee Full Name]

Social Security Number: [Last 4 Digits: XXX-XX-0000]

Case/Reference Number: [Reference Number]

To Whom It May Concern,

This letter serves as formal notification that [Company Name] is in receipt of the garnishment order/administrative wage garnishment (AWG) issued by [Federal Agency Name] dated [Date of Order].

We have processed this request and will comply with the withholding requirements as mandated by federal law. Please be advised of the following details regarding the commencement of withholdings:

- **Effective Date:** [Date withholding begins]
- **Pay Period Frequency:** [Weekly / Bi-Weekly / Monthly]
- **Withholding Amount:** [Dollar Amount or Percentage] per pay period
- **First Remittance Date:** [Expected date of first payment to agency]

The withheld funds will be remitted to the address provided in the order via [Check / Electronic Funds Transfer].

[Optional: If the employee is no longer employed or has insufficient earnings, state the reason here].

Should you require any additional information or have questions regarding our payroll cycle, please contact [Contact Person Name] at [Phone Number] or [Email Address].

Sincerely,

[Signature]
[Printed Name]
[Title]
[Company Name]