



Pinal County Justice Courts, Arizona

CASE NUMBER: _____

() -
Plaintiff(s) Name / Address / Phone

() -
Defendant(s) Name / Address / Phone

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Attorney for Plaintiff(s) Name / Address / Phone

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Attorney for Defendant(s) Name / Address / Phone

SATISFACTION OF JUDGMENT

ARS 33-964C

PLEASE TAKE NOTICE THAT:

I am the Plaintiff Counterclaimant 3rd Party Plaintiff

- I am the Judgment Creditor in this action.
- I have received full payment.
- The Judgment has been satisfied.

As signed below.

Date: _____
Signature

I CERTIFY that a copy of this document has been or will be mailed on _____ to:

Plaintiff at the above address Plaintiff's attorney Defendant at the above address Defendant's attorney

Date: _____ By _____
Signature