

Person Filing: _____
Mailing Address: _____
City, State, Zip: _____
Phone: () - _____
Representing: Self Attorney Other State Bar No. _____



Maricopa County Justice Courts, Arizona

CASE NUMBER: _____

SATISFACTION OF JUDGMENT (EARNINGS GARNISHMENT)

Judgment Creditor Name / Address / Email / Phone

Judgment Debtor Name / Address / Email / Phone

Garnishee Name / Address / Email / Phone

PLEASE TAKE NOTICE THAT:

The Judgment entered in this action has been satisfied.

Date _____
Signature of Judgment Creditor or Authorized Agent