

	CASE NUMBER:
Plaintiff(s) Name / Address / Email / Phone	Defendant(s) Name / Address / Email / Phone
Attorney for Plaintiff(s) Name / Address / Email / Phone	Attorney for Defendant(s) Name / Address / Email / Phone
SATISFACTION OF	JUDGMENT ARS33-964C
PLEASE TAKE NOTICE THAT:	
I am the $\square$ Plaintiff $\square$ Counterclaimant $\square$ 3rd Party Plaintiff	:
<ul> <li>I am the Judgment Creditor in this action.</li> <li>I have received full payment.</li> <li>The Judgment has been satisfied.</li> </ul>	
As signed below.	
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Date:	
Signature	
I CERTIFY that a copy of this document has been or will be maile	ed on to:
☐ Plaintiff at the above address ☐ Plaintiff's attorney [	☐ Defendant at the above address ☐ Defendant's attorney
Date: By Signature	
Signature	