

(1) Your Name: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing Self or Attorney for _____



**SUPERIOR COURT OF ARIZONA
MOHAVE COUNTY**

(2) _____
Petitioner/Plaintiff

(5) Case Number: _____

VS

**SATISFACTION OF JUDGMENT
(NON-EARNINGS)
(FORM 16)**

(3) _____
Respondent/Defendant

AND

(4) _____
Garnishee

(6) **Petitioner/Plaintiff** Judgment Creditor Judgment Debtor

Name: _____
Address: _____
City, State, Zip Code: _____
Phone(s): _____

(7) **Respondent/Defendant** Judgment Creditor Judgment Debtor

Name: _____
Address: _____
City, State, Zip Code: _____
Phone(s): _____

(8) **Garnishee**

Name: _____
Address: _____
City, State, Zip Code: _____
Phone(s): _____
Attorney: _____

I am the judgment creditor or authorized agent of the judgment creditor in this action. The judgment entered in this action has been satisfied.

Case No. _____

(9)

(10)

Copy provided to judgment debtor on: Date: _____ By: <input type="checkbox"/> Mail <input type="checkbox"/> Hand delivery	Copy provided to garnishee on: Date: _____ By: <input type="checkbox"/> Mail <input type="checkbox"/> Hand delivery
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(11) _____
Date

Signature of Judgment Creditor or Authorized Agent