

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ _____ Plaintiff(s)/Petitioner(s) v. Defendant(s)/Respondent(s)	▲ <b>COURT USE ONLY</b> ▲
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____                      E-mail: _____ FAX Number: _____                         Atty. Reg. #: _____	Case Number: _____  Division                      Courtroom
<b>SATISFACTION OF JUDGMENT</b> <input type="checkbox"/> PARTIAL <input type="checkbox"/> FULL	

In consideration of my receipt of \$\_\_\_\_\_ paid to me by \_\_\_\_\_ (Print name), on \_\_\_\_\_ (date),  partial  full satisfaction is acknowledged by me toward payment of the judgment amount rendered in my favor in the above-captioned action.

I hereby authorize the Clerk of Court to enter of record  partial  full satisfaction of judgment in the above-captioned action.

Dated: \_\_\_\_\_

\_\_\_\_\_  
 Judgment Creditor / Attorney  
 Petitioner(s)/Plaintiff(s)

Subscribed and affirmed, or sworn to before me in the County of \_\_\_\_\_, State of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
 Notary Public/Deputy Clerk