

**IN THE COUNTY COURT,
EIGHTH JUDICIAL CIRCUIT
IN AND FOR ALACHUA COUNTY, FLORIDA**

Plaintiff(s),

vs.

CASE NUMBER _____

Defendant(s).
/

SATISFACTION OF JUDGMENT

This document is signed by _____, (insert: "individually" or "as agent of Plaintiff corporation") on _____.

Plaintiff, _____, to acknowledge full payment of the judgment signed by the Judge on _____, _____. Plaintiff agrees that Defendant(s) do(es) not owe the Plaintiff any more monies for the judgment.

(Witness)

(Plaintiff)

(Witness)

State of Florida
County of Alachua

SWORN TO and subscribed before me on this _____ day of _____,
by _____.

_____ Personally known by me _____ Produced Identification/Type: _____
_____.

(SEAL)

Deputy Clerk or Notary Public