

**STATE OF MICHIGAN
JUDICIAL DISTRICT
JUDICIAL CIRCUIT**

CERTIFICATE OF SATISFIED JUDGMENT

CASE NO.

Court address

Court telephone no.

Plaintiff name(s), address(es), and telephone no(s).

Defendant name(s), address(es), and telephone no(s).

v

Plaintiff attorney, bar no., address, and telephone no.

A judgment was entered by this court on _____ .
Date

Satisfaction by Party

The judgment has been satisfied in full as to all defendants defendant _____ .
Name

_____ .
Date

Plaintiff/Attorney signature

Satisfaction by Clerk of the Court

The judgment has been paid in full to the court on _____ .
Date

_____ .
Date

Court clerk/Deputy court clerk

Satisfaction by Judge

After hearing, it has been determined that the judgment has been satisfied in full.

_____ .
Date

Judge

CERTIFICATE OF MAILING

I certify that on this date copies of this satisfaction were served upon the parties and their attorneys by ordinary mail at the address shown above.

_____ .
Date

Signature