

**IN THE JUSTICE COURT FOR TILLAMOOK COUNTY  
TILLAMOOK COUNTY COURTHOUSE  
201 LAUREL AVE  
TILLAMOOK, OR 97141  
503-842-3416**

\_\_\_\_\_  
Plaintiff(s) name

Case No. \_\_\_\_\_

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City, State, Zip

**SATISFACTION  
OF  
CLAIM/JUDGMENT**

\_\_\_\_\_  
Defendant(s) name

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City, State, Zip

The amount of \$\_\_\_\_\_ was received by the judgment creditor on \_\_\_\_\_  
in satisfaction of the claim/judgment. If this is a satisfaction of claim, I am requesting  
the court remove the case from the docket.

\_\_\_\_\_  
Plaintiff/Judgment Creditor

\_\_\_\_\_  
Date

State of Oregon, County of Tillamook

This instrument was acknowledged before me on \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public / Court Clerk