

**Motion and Affidavit Requesting Satisfaction of Judgment
(SDCL 15-16-15)**

State of South Dakota

Circuit Court

County _____

Judicial Circuit: _____

Court File Number: _____

Case Type: _____ Civil _____ SMC

Plaintiff

vs.

Defendant

**Motion and Affidavit Requesting
Satisfaction of Judgment
(SDCL 15-16-15)**

MOTION & AFFIDAVIT

I, _____, being sworn/affirmed on oath state:

1. I am the Defendant/Debtor in this action.
2. That on _____ a judgment in the amount of \$ _____ was entered against me and in favor of _____. The judgment was docketed on _____.
3. On _____ I paid the judgment in full. (Proof of payment must be attached, i.e. cancelled check, etc.)
4. ☐ I am unable to locate the creditor to obtain Satisfaction of Judgment. (Proof of payment must be attached, i.e. cancelled check, etc.)

☐ I did the following to attempt to locate the creditor: _____

☐ Creditor refuses to complete a Satisfaction Form for filing.

Based on the above information, I request the Court to direct the Clerk of Court to enter a satisfaction of judgment.

Dated: _____

Sworn/affirmed before me this
_____ day of _____, _____.

Notary Public/Deputy Court Clerk

Signature (Sign only in front of notary public or court clerk.)

Name: _____

Address: _____

City/State/Zip: _____

Telephone: () _____

Affidavit of Service by Mail

State of South Dakota

Circuit Court

County

Judicial Circuit: _____

Court File Number: _____

Case Type: _____ Civil _____ SMC

Plaintiff

vs.

Defendant

Affidavit of Service by Mail

I, _____, being sworn, state that I am at least 18 years of age having been born on _____, and that on _____, _____, I served the following papers: _____

(list all papers mailed to the other party)

by placing in an envelope a true and correct copy of each document addressed to _____ at _____ in the City of _____, State of _____, Zip Code _____ and depositing the envelope, with sufficient postage, in the United States Mail at the Post Office located in the City of _____ in the State of _____.

Dated: _____

Signature of Person Who Mailed Documents

(Sign only in front of notary public or court clerk.)

Name: _____

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

Sworn/affirmed before me this _____ day of _____, _____.

Notary Public \ Deputy Clerk of Court