	urt Address	Telephone		
	urt Address	Case No.		
		Complaint	#	
Plaintiff/Judgment Creditor		Defendant/Judgment Deb	tor	
Address		Address		
City, State, Zip Te	elephone	City, State, Zip		Telephone
TO INTERF	ROGATORIES IN Id. Rules 3-633(a)		N	ies in order to
nforce a money judgment resulting from a sn	nall claims action (am	ount sued for was \$5,000 o	or less, exclus	sive of interest, cost
nd attorney's tees). The court entered judgment in favor of the judgment cred go, in the amount of \$ The judgment creditor did not send the judgment debted		which was at least ten (10) day		
☐ The judgment creditor did not send the ju ■ <b>R</b>	dgment debtor a Judg	gment Debtor Fact Inform	nation Sheet	(CC-DC-CV-114)
<ul> <li>properly completed it and returned it</li> <li>at least one (1) year has elapsed s</li> <li>the court has granted leave to mal</li> <li>he judgment creditor served interrogatories</li> <li>fore than fifteen (15) days have elapsed, and</li> <li>idgment remains unpaid. The judgment creditor served interrogatories.</li> </ul>	since the entry of the ke this request. s on the judgement de	udgment, or btor	Date	part of the Igment debtor to
Date	S	ignature of Judgment Creditor	Attorney	
			2	Attorney Number
Printed Name		0 0	lephone Numb	•
Printed Name Address		0 0	-	•
Address City, State, Zip		Te	lephone Numb	•
Address City, State, Zip certify that I served a copy of this motion u	<b>CERTIFICATE OF</b>	SERVICE	lephone Numb Fax E-mail	er
Address City, State, Zip certify that I served a copy of this motion u	non the following na	SERVICE	lephone Numb Fax E-mail	er
Address City, State, Zip certify that I served a copy of this motion u	non the following na	Te SERVICE rty or parties by □ hand	lephone Numb Fax E-mail	er
Address City, State, Zip	non the following na	Te SERVICE rty or parties by □ hand	lephone Numb Fax E-mail	er
Address City, State, Zip certify that I served a copy of this motion u rst-class mail, postage prepaid on	non the following na	Te SERVICE rty or parties by □ handto:	lephone Numb Fax E-mail delivery 🗆	er
Address City, State, Zip certify that I served a copy of this motion u rst-class mail, postage prepaid on	non the following na	Te SERVICE rty or parties by □ handto:	lephone Numb Fax E-mail delivery 🗆 r	er
Address City, State, Zip certify that I served a copy of this motion u rst-class mail, postage prepaid on Name	non the following na	Te SERVICE rty or parties by □ handto: Ci	lephone Numb Fax E-mail delivery 🗆 r Address ty, State, Zip	er
Address City, State, Zip certify that I served a copy of this motion u rst-class mail, postage prepaid on Name	Date	Te SERVICE rty or parties by □ handto: Ci	lephone Numb Fax E-mail delivery □ 1 Address ty, State, Zip Address ty, State, Zip	er mailing
Address City, State, Zip certify that I served a copy of this motion u rst-class mail, postage prepaid on Name Name Date	Date	Te SERVICE rty or parties by □ handto: Ci ci ignature of Party Serving/Atto	lephone Numb Fax E-mail delivery □ 1 Address ty, State, Zip Address ty, State, Zip rney	er mailing Attorney Numbe
Address City, State, Zip certify that I served a copy of this motion u rst-class mail, postage prepaid on Name Name Date	Date Date S ORDER answer the interrogat	Te SERVICE rty or parties by □ handto: Ci	lephone Numb Fax E-mail delivery □ Address ty, State, Zip Address ty, State, Zip rney ditor, and to	er mailing Attorney Number serve a