

Certified Abstract of Judgment for a Motor Vehicle Loss

Use this form to notify us of the status of a court judgment resulting from a collision or motor vehicle theft. Fields marked Required must be filled in. After the court completes their portion, fax to 360-570-4966 or mail to: Driver Records, Department of Licensing, PO Box 9030, Olympia, WA 98507.

Incomplete forms will not be processed.

| Plaintiff (individual bringing le | gal action)–Fill out thi | s section and sign | . Take to th | e court to | complete. | |
|--|--------------------------|------------------------|----------------------------------|---------------------------------|-------------------------|--|
| Required: Plaintiff last name | | Required: First name | | Required: Middle | | |
| Required: Address, City, State, ZIP code | | | | Plaintiff driver license number | | |
| Attorney/Insurance company | –Enter attornev or ins | surance company | information | . if plaintif | f has one. | |
| Individual or company represented | , | | | <u> </u> | | |
| Attorney/Insurance company name | | | (Area code) Phone number | | | |
| Address, City, State, ZIP code | | | | | | |
| vs. Defendant 1 | | | | | | |
| Required: Full name of individual required to respond to legal action (Last, First, Middle) Driver license number | | | | | Required: Date of birth | |
| Address, City, State, ZIP code | | | | | | |
| vs. Defendant 2 | | | | | | |
| Required: Full name of individual required to respond to legal action (Last, First, Middle) Driver license number | | | | | Required: Date of birth | |
| Address, City, State, ZIP code | | | | | | |
| Incident | | | | | | |
| Required: Incident type | Poguirod: Incid | ont data | Poquirod: [| Oata filad in a | ourt | |
| Required: Incident type ☐ Collision ☐ Theft of motor vehicle | | | Required: Date filed in court | | | |
| I certify under penalty of perjury | under the law of Was | hington that the fo | regoing is t | rue and c | orrect | |
| recording arrater personally er persons | | - | ogomig io i | , 0,0 0,70 0 | <i>511</i> 66 1. | |
| | | X | | | | |
| Date and place signed | | Plaintiff signature | | | | |
| Court information | 1 | | | | | |
| Court cause number (required) | Date judgment entered | Extension date (attach | ttach extension docs) Judg \$ | | gment amount (required) | |
| Check one (required) | | | | | | |
| \square Judgment unsatisfied . The | | | | | | |
| court, no appeal has been a | | | | | | |
| judgment is from a cause of registration under the laws o | | ne ownersnip, mair | itenance or | use of a | venicle subject to | |
| Judgment by default. This | | use of action arisin | ag out of th | a ownerst | nin maintenance | |
| or use of a vehicle subject to | | | | | | |
| judgment was rendered. | rogistration ander the | o laws of this state | , and oo de | iyo navo c | napsea sirioe | |
| How served: ☐ Personal service, date served ☐ Certified mail ☐ Other | | | | | | |
| ☐ Payment by installment or | | | | | | |
| ☐ Default on installment orde | | | | | | |
| \square Judgment fully satisfied. \top | | | | | | |
| fully satisfied. | | | , 0 | | | |
| \square Judgment discharged thro | ough bankruptcy. The | ere is evidence on | file in this o | ourt that t | his case has | |
| been discharged by bankrup | otcy. | | | | | |
| ☐ Vacate judgment. | • | | | | | |
| Date of certification (required) Court and | city (required) | | Court stamp a | area | | |
| Court clerk name | Judge name | | | | | |
| Chapter 46.29 RCW | | | | | | |
| RCW 46.29.270(1); RCW 46.29 DR-500-003 (R/12/18)VWA | .310(1)(2)(3); RCW 46 | 5.29.400 | | | | |