ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NO.	:	FOR COURT USE ONLY
NAME: FIRM NAME:			For your protection and
STREET ADDRESS:			privacy, please press the Clear This Form button
CITY: TELEPHONE NO.:	STATE: FAX NO.:	ZIP CODE:	after you are done printing
E-MAIL ADDRESS:			this form.
ATTORNEY FOR (name):			-
SUPERIOR COURT OF CALIFORNIA, G JUSTICE CENTER: Central - 700 Civic Center Dr. West, Santa Harbor-Newport Beach Facility - 4601 Jam North - 1275 N. Berkeley Ave., P. O. Box 5 West – 814 13 th Street, Westminster, CA 9	a Ana, CA 92701-4 Iboree Rd., Newpo 5000, Fullerton, CA	045 ort Beach, CA 92660-2595	
PLAINTIFF:			
DEFENDANT:			
STIPULATION FOR TIME PAY	MENTS (AFT	FER JUDGMENT)	CASE NUMBER:
Judgment was entered on the above of	case in the amo	ount of \$	
Balance of judgment still owing is \$ \$, for a Total amount o	f¢	, plus costs of \$, and interest of
	ч Ф <u></u>	·	
It is stipulated between the parties, th			
payable at the rate of: \$per month beginning on (date)and on theday of each month thereafter until paid in full. If any payment is missed, then the			
on theday of each mole entire balance becomes due immediat		until paid in full. If any	payment is missed, then the
Enforcement of Judgment is stayed, unless a Declaration of Default in Payments is filed.			
I declare under penalty of perjury under the	e laws of the Sta	te of California that the fo	pregoing is true and correct.
Dete			
Date:			
(TYPE OR PRINT NAME)			(SIGNATURE OF PLAINTIFF)
(TYPE OR PRINT NAME)			(SIGNATURE OF PLAINTIFF)
Date:			
(TYPE OR PRINT NAME)			(SIGNATURE OF DEFENDANT)
(TYPE OR PRINT NAME)			(SIGNATURE OF DEFENDANT)
Approved for Optional Use L1094 (Rev. March 2019)		R TIME PAYMENTS UDGMENT)	
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