

**COUNTY COURT, PINELLAS COUNTY, FLORIDA  
SMALL CLAIMS DIVISION**

UCN: \_\_\_\_\_ Reference No.: \_\_\_\_\_

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

VS.

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

**MOTION FOR RECORDATION OF JUDGMENT AS LIEN**

TO THE CLERK OF THE ABOVE STYLED COURT:

The undersigned hereby requests the Clerk of the above-styled Court to Re-Record the Judgment entered on \_\_\_\_\_, Book \_\_\_\_\_ Page \_\_\_\_\_ in the above styled cause as a Judgment Lien and return a Certified Copy of the same to the address shown below.

\_\_\_\_\_  
Signature of Party Requesting Lien

\_\_\_\_\_  
Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone

<p><b>CERTIFIED COPY DELIVERED TO RECORDING</b></p> <p>DATE: _____</p> <p>BY: _____</p>
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