

**IN THE MAGISTRATE COURT OF GRADY COUNTY
STATE OF GEORGIA
24 3rd Avenue NE Cairo, GA 39828 / (229) 377-4132**

REQUEST FOR WRIT OF FIERI FACIAS

DATE: _____

PLAINTIFF

CIVIL ACTION NO. _____

VS.

DEFENDANT

Please issue a Writ of Fieri Facias on the above referenced civil action, in the amount of \$ _____, as follows:

Principal	\$ _____	
Pre judgment interest	\$ _____	
Attorney Fees	\$ _____	
Court Cost	\$ _____	
(Minus Payments)	\$ _____	
Post judgment interest @ _____ % APR	\$ _____	
Fi. Fa. Cost	\$	29.00
Other Costs	\$ _____	
Total	\$ _____	(Should match above amount)

Signature

Address

Phone Number