

ATASCOSA COUNTY PROCESS REQUEST SHEET

1 COURTHOUSE CIR. DR., STE. 4-B / JOURDANTON, TX 78026

PHONE # 830.769.3011 / FAX # 830.769.1332

FOR EACH PARTY SERVED YOU MUST FURNISH ONE (1) COPY OF THE PLEADING.

CAUSE NO. _____

COURT NO. _____

SERVICE WILL ONLY BE ISSUED UPON PAYMENT OF COST!

TYPE OF PROCESS TO BE ISSUED; (Citation, Show Cause, Precept, TRO, etc.)

NAME OF DOCUMENT/PLEADING TO BE SERVED

SERVICE BY:

ATTORNEY FOR PICK UP ATTORNEY RETURN BY MAIL CONSTABLE / SHERIFF

CIVIL PROCESS SERVER:

AUTHORIZED PERSON: _____ PHONE: _____

CERTIFIED MAIL RESTRICTED DELIVERY

COURTHOUSE POSTING # OF DAYS TO BE POSTED: _____

PUBLICATION NAME OF NEWSPAPER: _____ BRIEF STATEMENT OF SUIT (USE REVERSE SIDE)
OF DAYS TO BE PUBLISHED: _____

BRIEF STATEMENT OF SUIT (USE REVERSE SIDE)

PARTY/PARTIES TO BE SERVED:

[1] NAME/AGENT _____
ADDRESS _____

[2] NAME/AGENT _____
ADDRESS _____

[3] NAME/AGENT _____
ADDRESS _____

ATTORNEY OR PARTY REQUESTING ISSUANCE OF PROCESS;

NAME _____

ATTORNEY BAR # _____

MAILING ADDRESS: _____

FAX # _____

PHONE # _____

ATTORNEY REPRESENTS: PLAINTIFF DEFENDANT _____ OTHER _____