

**CIVIL PROCESS REQUEST FORM**

CASENUMBER: \_\_\_\_\_ CURRENT COURT: \_\_\_\_\_

Name(s) of Documents to be served: \_\_\_\_\_

File Date: \_\_\_\_\_ Month/Day/Year

Service To Be Issued On (Please List Exactly As The Name Appears In The Pleading To Be Served):

Issue Service to: \_\_\_\_\_

Address of Service: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Agent (if applicable): \_\_\_\_\_

**TYPE OF SERVICE/PROCESS TO BE ISSUED:** (Check the proper box)

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Citation              | <input type="checkbox"/> Citation by Posting | <input type="checkbox"/> Citation by Publication     | <input type="checkbox"/> Citation by Rule 106    |
| <input type="checkbox"/> Citation Scire Facias | <input type="checkbox"/> Newspaper           | <input type="checkbox"/> Temporary Restraining Order | <input type="checkbox"/> Precept                 |
| <input type="checkbox"/> Notice                | <input type="checkbox"/> Protective Order    | <input type="checkbox"/> Secretary Of State Citation | <input type="checkbox"/> Capias                  |
| <input type="checkbox"/> Attachment            | <input type="checkbox"/> Sequestration       | <input type="checkbox"/> Subpoena                    | <input type="checkbox"/> Other (Please Describe) |

**Service by (select one):**

- Attorney Pick-Up (Phone or email) \_\_\_\_\_
- Email/Mail to Attorney at: \_\_\_\_\_
- Grimes County Constable (Please verify address is in Grimes County)
- Certified Mail by District Clerk
- Civil Process Server- Authorized Person to Pick-up: \_\_\_\_\_ Phone: \_\_\_\_\_
- Other, explain \_\_\_\_\_

**Note: Additional Fees may apply.**

**Issuance of Service Request By:**

Attorney/Party Name: \_\_\_\_\_ Bar# or ID \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_