

CAUSE NO. \_\_\_\_\_

_____	§	IN THE JUSTICE COURT
PLAINTIFF	§	
VS.	§	PRECINCT 3 PLACE 1
_____	§	
DEFENDANT	§	HIDALGO COUNTY, TEXAS

**REQUEST FOR ABSTRACT OF JUDGMENT**

Judgment Date: \_\_\_\_\_

Judgment Amount Awarded: \_\_\_\_\_

Monies Received From Defendant to Date: \_\_\_\_\_

Last 4 Digits of Defendant's Driver License: \_\_\_\_\_

Last 4 Digits of Defendant's Social Security Number: \_\_\_\_\_

Defendant's Date of Birth: \_\_\_\_\_

Defendant's Last Known Address: \_\_\_\_\_

**I understand that it is my responsibility to file Abstract(s) and to remit the filing fee(s) to the county or counties of my choice.**

Plaintiff                       Plaintiffs Agent                      \_\_\_\_\_ Date

HOLD FOR PICK UP                       MAIL ABSTRACT TO ADDRESS LISTED

Plaintiff's Name: \_\_\_\_\_

Mailing Address, City, State, Zip code: \_\_\_\_\_

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