CAUSE NO. _____

_____	§	IN THE JUSTICE COURT
PLAINTIFF	§	
	§	
vs.	§	PRECINCT -----
	§	
_____	§	
DEFENDANT		BRAZOS COUNTY, TEXAS

REQUEST FOR ABSTRACT OF JUDGMENT

- **Creditor's Last Known Address**:_____
- **Debtor's Last Known Address**:_____
  - **Debtor's Date of Birth**:_____
  - **Debtor's Social Security No**:_____
  - **Debtor's Driver License No**:_____

Date of Judgment:_____

Amount of Judgment:_____

Judgment Credit, if any:_____

Number of Abstracts Requested:_____

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. The fee to issue an abstract judgment from the Brazos County Justice of the Peace, is **$5.00 per abstract.**

_____ _____

☐Plaintiff ☐Plaintiff's Agent/Attorney Date

Requested by:

Name:_____

Address:_____

City/State/Zip:_____

Phone Number:_____

Email: _____

(If not indicated, abstract will be mailed)

☐ HOLD FOR PICK UP

☐ RETURN BY MAIL

☐ RETURN BY EMAIL