

COMPLETE THIS FORM WHEN REQUESTING THE ISSUANCE OF AN *ABSTRACT OF JUDGMENT*,
WRIT OF EXECUTION OR ORDER OF SALE ONLY.

POST-JUDGMENT REQUEST FORM

A COPY OF THE ORDER OR JUDGMENT MUST BE FURNISHED

Circle one: Small Claim, Civil or Debt Claim

Cause No. _____

Date requested: _____

Judgment date: _____

Petitioner/Plaintiff: _____

VS

Request:

Deliver to: (Check One only)

Abstract of Judgment _____

Mail to Attorney _____

Execution _____

Attorney pick up _____

Order of Sale _____

County Clerk _____

Sheriff or Constable _____

AMOUNT OF CREDIT PAID TOWARD JUDGMENT (If any): \$ _____

Last known address of Judgment Debtor: _____

PRECINCT/COUNTY: _____

Date of Birth: ____ / ____ / ____

Driver License: _____

S.S.N. _____

Attorney or Party making request information:

Name: _____

Address: _____

Date Issued: _____

City/Zip Code: _____

Deputy: _____

Phone Number: _____

Routed To: _____