

CALDWELL COUNTY DISTRICT CLERK
TINA MORGAN FREEMAN

PROCESS REQUEST

PLEASE PRINT ALL INFORMATION CLEARLY & NEATLY

CAUSE # _____

For each party served you must furnish 1 copy of the pleading(s).

Service Requested by:

Name _____

Address _____

Phone # _____ Email _____

INSTRUMENT TO BE SERVED _____

Service By (check one)

_____ Sheriff _____ Return by mail to: _____

_____ Certified Mail _____ Pickup by whom: _____

_____ Restricted Delivery (add'l cost)

Citation by Posting at Courthouse Door _____

Citation by Publication (Name of Paper) _____

State relief requested for citation by posting or publication only

Attach legal description of property if applicable

RELIEF REQUESTED _____

List Statute for citation form/type requested: _____

Service to be issued on: (If service address is outside of Caldwell County,
party is responsible for service)

1. Name _____

Address _____

City, State, Zip _____

Agent if applicable _____

2. Name _____

Address _____

City, State, Zip _____

Notes:

Signature of agent requesting service

Date