

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

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

§  
§  
§  
§  
§  
§

IN THE JUSTICE COURT

PRECINCT 2

FREESTONE COUNTY, TEXAS

**REQUEST FOR ABSTRACT OF JUDGMENT**

Date Requested (MM/DD/YYYY): \_\_\_\_\_

Date of Judgment (MM/DD/YYYY): \_\_\_\_\_

**Information for the Person Who the Judgment is Against:**

\_\_\_\_\_  
(Defendant's Name)

\_\_\_\_\_  
Address                                      Apt/Ste. #

\_\_\_\_\_  
City    State    Zip Code

Last 3 numbers of driver's license: \_\_\_\_\_

State (If NOT Texas): \_\_\_\_\_

Last 3 numbers of social security: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**Information for the Person Requesting the Remedy:**

\_\_\_\_\_  
(Printed Name)

Bar Number \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

\_\_\_\_\_  
Address                                      Apt/Ste. #

\_\_\_\_\_  
City    State    Zip Code

Please submit this request along with an \$5.00 fee and self-addressed envelope to Freestone County Justice Court, Precinct 2 at P.O. Box 218, Teague, TX 75860.