



**PATTI L. HENRY**  
**CHAMBERS COUNTY DISTRICT CLERK**

**REQUEST FOR ABSTRACT OF JUDGMENT**

DATE: \_\_\_\_\_

Please process this request to have Judgment against the Defendant/Respondent abstracted. The information below is to be stated on the abstract.

CAUSE NUMBER: \_\_\_\_\_

Judicial District Court: \_\_\_\_\_

STYLE: \_\_\_\_\_

VS.

Creditor's last known address: \_\_\_\_\_

Debtor's last known address: \_\_\_\_\_

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

Amount of Costs: \_\_\_\_\_

Debtor's Social Security No: \_\_\_\_\_

Attorney's Fees: \_\_\_\_\_

Debtor's Driver's License Number: \_\_\_\_\_

Interest: \_\_\_\_\_

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

Judgment Credit, if any: \_\_\_\_\_

Amount of Judgment: \_\_\_\_\_

**Requested By:**

Law Firm: \_\_\_\_\_

Attorney: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

City

State

Zip

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

\*Please submit this request with the \$8.00 Abstract of Judgement fee.