

# REQUEST FOR NOTICE TO EMPLOYER OF INCOME WITHHOLDING

PAYMENT OF \$15.00 MUST BE SUBMITTED WITH THIS FORM AS FEE FOR THE FOREGOING REQUEST.

TO: CHAMBERS COUNTY DISTRICT CLERK  
P.O. DRAWER NN  
ANAHUAC, TEXAS 77514

*I REQUEST THAT A NOTICE OF ASSIGNMENT OF INCOME BE ISSUED FOR:*

CAUSE NUMBER: \_\_\_\_\_ IN THE 344<sup>TH</sup>/253<sup>RD</sup> (circle one) DISTRICT COURT

STYLE \_\_\_\_\_ VS

NAME OF EMPLOYER WHICH ASSIGNMENT IS TO BE ISSUED TO:

ADDRESS:

CONTACT NAME/NUMBER \_\_\_\_\_

REQUESTED BY:

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_