

JUDGE CHRISTOPHER G. MORALES

FORT BEND COUNTY COURT AT LAW NO. 1

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PERSONAL REPRESENTATIVE GENERAL INFORMATION

PLEASE **COMPLETE** AND RETURN TO THE **JUDGE'S OFFICE**

PLEASE PRINT ALL INFORMATION

ESTATE INFORMATION

Docket Number: _____ Initial Court Date: ____/____/____

Estate Name: _____

Type of Estate: Guardianship Deceased

Was Bond Required: Yes No If so, how much? \$ _____

PERSONAL INFORMATION

Your Name: _____
(Last) (First) (Middle) (Maiden)

Home Address: _____

City/State/Zip: _____

Home Telephone: () _____ Cell Phone: () _____

Driver's License No.: _____ State: _____ Date of Birth: ____/____/____

E-mail Address: _____

Employer: _____

Business Phone: () _____ Hours: _____

Business Address: _____

City/State/Zip: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Address: _____

City/State/Zip: _____

Phone: () _____ Relationship: _____

ATTORNEY INFORMATION

Attorney Name: _____

Address: _____

City/State/Zip: _____

Phone: () _____ Fax: () _____

State Bar No.: _____ Email: _____

YOU ARE RESPONSIBLE TO NOTIFY THE COURT IN WRITING OF ANY CHANGE IN YOUR ADDRESS