



BEVERLEY MCGREW WALKER

DISTRICT CLERK
Fort Bend County, Texas

REQUEST FOR PROCESS

All sections must be completed for processing this request.

Section 1:

Cause No. _____

Style: _____ VS _____

Section 2:

Check Process Type:

- | | |
|---|---|
| <input type="checkbox"/> Citation | <input type="checkbox"/> Precept to Serve / Notice of Hearing |
| <input type="checkbox"/> Citation by Posting | <input type="checkbox"/> Citation by Commissioner of Insurance |
| <input type="checkbox"/> Temporary Restraining Order | <input type="checkbox"/> Notice of Registration of Foreign Judgment |
| <input type="checkbox"/> Citation by Secretary of State | <input type="checkbox"/> Writ of _____ |
| <input type="checkbox"/> Application for Protective Order / Temporary (Ex Parte) Protective Order | |
| <input type="checkbox"/> Citation by Publication*: | |
| <input type="checkbox"/> Daily: Fort Bend Herald | <input type="checkbox"/> Once a Week: Fort Bend Independent |
| <input type="checkbox"/> Other: _____ | |

* In Accordance with the Fort Bend County Term Contract for Newspaper Publication of Legal Notices

- TCPRC 17.032 Citation by Publication
(Citation will be posted by the District Clerk's Office on the Office of Court Administration website)
- Other _____

**REQUEST FOR ISSUANCE OF SUBPOENA MUST BE SUBMITTED ON A
SUBPOENA APPLICATION FORM**

Section 3:

Title of Document/Pleading to be attached for service: _____

Section 4:

Parties to be Served (Please type or print):

1. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

2. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

3. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

4. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Section 5

Check Service Type – Additional fees may apply:

- | | |
|---|---|
| <input type="checkbox"/> Fort Bend County – Constable* | <input type="checkbox"/> District Clerk Service** |
| <input type="checkbox"/> Fort Bend County – Sheriff* | <input type="checkbox"/> Certified Mail |
| <input type="checkbox"/> Registered Mail (Out of Country) | <input type="checkbox"/> e-Service*** |
| | <input type="checkbox"/> Not Applicable – See Section 7 (Pro-Se only) |

*Fort Bend County Constable and Sheriff will only serve within their jurisdiction.

** Fort Bend County District Clerk’s Office will only conduct service on Citation by Publications posted on the Office of Court Administration website.

*** Service papers will be e-mailed directly to the Party or Attorney requesting service

Section 6 (ONLY if Section 7 does not apply)

Please Note: Our office will use the e-Service email address registered with the Texas State Bar.

Attorney Name: _____

Address: _____

Street/P.O. Box

City

State

Zip

Telephone No. _____ Bar No. _____

Section 7 (ONLY if Section 6 does not apply)

Pro-Se Name: _____

Address: _____

Street/P.O. Box

City

State

Zip

Telephone No. _____ Email Address _____

Pro-Se Service Only:

- Mail to Pro-se Party* Hold for Pick up

* Service papers will be mailed directly to the Party or Attorney requesting service

Physical Address

1422 Eugene Heimann Circle, Room 31004
Richmond, Texas 77469

Phone: (281) 341-4509
Fax: (281) 341-4519

Mailing Address

301 Jackson Street, Room 101
Richmond, Texas 77469