P.O. Box 4 Gatesville, Tx 76528 | 254-865-5911 Ext: 100 | becky.moore@coryellcountytx.gov

REQUEST FOR ISSUANCE OF SERVICE

CASE NUMBER:		COURT:
Name(s) of Documents to be Served:		
FILE DATE (mm/dd/yyyy):		
SERVICE TO BE ISSUED	\mathbf{ON} (please list exactly as the na	me appears in the pleading to be served):
Issue Service to:		
City, State & Zip:		
Agent (if applicable):		
TYPE OF SERVICE/PROC	CESS TO BE ISSUED: (ch	eck the proper box)
☐ Citation	☐ Citation by Publication	☐ Citation Rule 106 Service
☐ Citation by Posting	☐ Precept	☐ Notice
☐ Temporary Restraining Order	☐ Capias	☐ Writ of Attachment
☐ Protective Order	☐ Injunction	☐ Writ of Garnishment
☐ Secretary of State Citation	☐ Subpoena	☐ Writ of Sequestration
☐ Other (please describe)		
SERVICE BY: (check one)		
□E-Issuance by District Clerk (no	copy fees charged for E-Issuance)
Deliver to Email:		_(Attorney/Party responsible for service & return)
□Attorney Pick-Up (phone):		
□Mail to Attorney At:		(postage required)
☐Coryell County Sheriff (fees requ	uired)	
□Certified Mail by District Clerk	(address):	(fees required)
□ Civil Process Server – Authorized person to pick up:		Phone:
□Other (explain):		
Issuance of Service Requested By: Attorney/Party Name:		
Mailing Address:		Date:
Phone Number:	Signature:	