Live Oak County District Clerk

REQUEST FOR ISSUANCE INFORMATION SHEET

CAUSE NO.: _____ Date: _____

STYLE OF CASE:

_____

NAME OF DOCUMENT TO BE ATTACHED TO ISSUANCE:

_____

****** COPIES TO ATTACH TO YOUR ISSUANCE ARE $1 PER PAGE IF SERVED THROUGH THE SHERIFF'S OFFICE OR CERTIFIED MAIL ******

TYPE OF ACTION REQUESTED ($8 EA.):

( ) CITATION ( ) PRECEPT

( ) TEMPORARY RESTRAINING ORDER ( ) WRIT _____

( ) ABSTRACT JUDGMENTS ( ) SUBPOENA

( ) OTHER _____

NAME OF PARTY ON CITATION/PRECEPT/ ETC.

1. Name: _____
   Address: _____
   City, State, Zip: _____
   _____
   Email: _____

2. Name: _____
   Address: _____
   City, State, Zip: _____
   _____
   Email: _____

3. Name: _____
   Address: _____
   City, State, Zip: _____
   _____
   Email: _____

4. Name: _____
   Address: _____
   City, State, Zip: _____
   _____
   Email: _____

5. Name: _____
   Address: _____
   City, State, Zip: _____
   _____
   Email: _____

SERVICE TYPE (FEE IS PER ISSUANCE):

( ) SERVICE BY LIVE OAK COUNTY SHERIFF'S OFFICE ($100)

( ) SERVICE OF WRITS BY LIVE OAK CO SHERIFF'S OFFICE ($200)

( ) SERVICE BY CERTIFIED MAIL ($100)

( ) SERVICE BY CERTIFIED MAIL RESTRICTED ($100)

( ) PRIVATE PROCESS SERVER
EMAIL ADDRESS (if applicable): _____

( ) SEND BACK TO ATTORNEY FOR SERVICE THROUGH EMAIL
EMAIL ADDRESS (if applicable): _____

( ) CITATION BY PUBLICATION (PAY PAPER FOR PUBLICATION FEES)
NAME OF NEWSPAPER_____

( ) OTHER: _____
_____

REQUESTING PARTY

NAME: _____ PHONE NUMBER: _____