JUDGE DIANA RINCHE-MCGINNIS JUSTICE OF THE PEACE PCT 2 JP2@ARANSASCOUNTY.ORG



2840 HWY 35, ROCKPORT, TX 78382 PHONE (361)790-0131 FAX (361)790-5392

	CAUSE NO.	
PLAINTIFF	§ §	IN THE JUSTICE COURT
v.	§ § §	PRECINCT NO
DEFENDANT	- § §	COUNTY, TEXAS
	PETITION: DEBT	CLAIM CASE
Defendant(s)		address
SERVICE OF CITATION: work, □ registered mail, I	Service is requested on I □ certified mail, return r wed by the Texas Rules (Defendant(s) by: personal service at home or eceipt requested. If required, Plaintiff requests of Civil Procedure. Other addresses where



ADDITIONAL INFORMATION (CASE BAS Account/Credit Card Name:	SED ON CREDIT CARD, REVOLVING ACCOUNT, OR OPEN ACCOUNT):
Account Number (may be masked):	
Date of Issue/Origination:	
Date of Charge-Off/Breach:	
	as of
ADDITIONAL INFORMATION (CASE BAS OR BUSINESS LOAN):	SED ON PROMISSORY NOTE OR OTHER PROMISE TO PAY PERSONAL
Date/Amount of Original Loan:	, \$
Repayment Accelerated?	
Date Final Payment Due:	
Amount Due on Final Payment Date:	
Amount Owed: \$	as of
	or I does not seek ongoing interest. If so, this interest is based y reason:
	and
should be at%. \$	of interest was due as of
ASSIGNMENT OF CLAIM: Plaintiff 2 was the original claimant/creditor was	s or 🛚 was not assigned or otherwise transferred this claim. If so,
Subsequent holders were	
The date the debt was assigned/transf	ferred to Plaintiff was
□ I hereby request a jury trial. The f	ee is \$22 and must be paid at least 14 days before trial.
-	and any other motions or pleadings to be sent to my email

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Plaintiff's Printed Name	Signature of Plaintiff or Plaintiff's Attorney		
Defendant's Information (if known): Date of birth:			
Last three digits of Driver License: Last three digits of Soc. Sec. No.: Phone No.:	Address of Plaintiff or Plaintiff's Attorney		
	City	State	Zip
	Phone & Fax No. of Plaintiff or Plaintiff's Attorney		