



Pam Hartt
Hardin County District Clerk
P.O. Box 2997
Kountze, Texas, 77625
(409) 246-5150 Office
(409) 246-5288 Fax

FAX FILING COVER FORM

ATTORNEY Name _____

Representing _____

Address _____

Phone _____ Fax _____

Email _____

Please file the following lawsuit: _____ Cause# _____

Styled _____

vs

Description of Document transmitted (Please send one document per transmittal form)

Document Title _____

ISSUANCE REQUESTS

Type of Service Requested (i.e. citation, notice, TRO, etc) _____

Issue to _____

Registered Agent (if applicable) _____

Service Address _____

Please specify one of the following for the completed issuance papers:

_____ Return Issuance by mail to: _____

_____ Deliver Issuance Certified Mail to: _____

_____ Deliver Issuance to Hardin County Sheriff for service.

There is an \$80 charge for certified mail and sheriffs service for each issuance. If requesting issuance mailed, there will be standard postage fees applied.

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FILING FEES:

Number of Pages Faxed (including cover sheet) _____ @ \$1.00 per page \$ _____
Filing Fees \$ _____
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TOTAL \$ _____

Payment for fax filings may only be made by credit card. A 2.65% of total fee will be assessed for each credit card transaction (minimum \$3).

I hereby authorize the District Clerk to charge to my credit card for payment of the services requested above:

Credit Card Type _____ Credit Card Number _____
Date of Expiration _____ Security Code _____
Name as it Appears on Credit Card _____
Cardholder Address & Phone _____
Authorized Signature _____

ACKNOWLEDGEMENT OF FILING AND PAYMENT RECEIPT (for clerk's use only)

If new suit or pleading is being filed, a filemarked copy of the first page of the document is included with this transmittal:

Date payment processed _____ Amount of Credit Card Payment _____

Credit Card Transaction# _____

Processed by: _____

Deputy Clerk