

CASE NO. \_\_\_\_\_

\_\_\_\_\_  
(PLAINTIFF)

§

JUSTICE OF THE PEACE

vs.

§

PRECINCT ONE – PLACE ONE

§

FORT BEND COUNTY, TEXAS

\_\_\_\_\_  
(DEFENDANT)

**ORIGINAL PETITION DEBT CLAIMS**

Plaintiff Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_

Defendant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_

(if known): Date of Birth \_\_\_\_\_ Last 3 Numbers of Driver License \_\_\_\_\_ Last 3 Numbers of Social Security \_\_\_\_\_

Defendant may be served at: address above / other: \_\_\_\_\_

Complaint: The basis for the claim which entitles the plaintiff to seek relief against the defendant is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Relief Requested: Plaintiff seeks damages in the amount of \$ \_\_\_\_\_.

**ADDITIONAL INFORMATION (CASE BASED ON CREDIT CARD, REVOLVING ACCOUNT, OR OPEN ACCOUNT):**

Account/Credit Card Name: \_\_\_\_\_ Account Number (may be masked): \_\_\_\_\_

Date of Issue/Origination: \_\_\_\_\_ Date of Charge-Off/Breach: \_\_\_\_\_ Amount Owed \$ \_\_\_\_\_ as of \_\_\_\_\_

**ADDITIONAL INFORMATION (CASE BASED ON PROMISSORY NOTE OR OTHER PROMISE TO PAY PERSONAL OR BUSINESS LOAN):**

Date/Amount of Original Loan: \_\_\_\_\_, \$ \_\_\_\_\_ Repayment Accelerated? \_\_\_\_\_ Date Final Payment Due: \_\_\_\_\_

Amount Due on Final Payment Date \$ \_\_\_\_\_ Amount Due: \$ \_\_\_\_\_ as of \_\_\_\_\_.

**ONGOING INTEREST:** Plaintiff  does, or  does not seek ongoing interest. If so, this interest is based on the following contractual/statutory reason: \_\_\_\_\_ and should be at \_\_\_\_%. \$ \_\_\_\_\_ of interest was due as of \_\_\_\_\_.

**ASSIGNMENT OF CLAIM:** Plaintiff  was, or  was not assigned or otherwise transferred this claim. If so, the original claimant/creditor was \_\_\_\_\_, subsequent holders were \_\_\_\_\_, and the date the case was assigned/transferred to plaintiff was \_\_\_\_\_.

**If you wish to give your consent for the answer and any other motions or pleadings to be sent to your email address, please check this box, and provide your valid email address:** \_\_\_\_\_.

\_\_\_\_\_  
Signature of          Plaintiff          Agent          Attorney

\_\_\_\_\_  
Printed Name of          Plaintiff          Agent          Attorney

Address / Phone Number (if different from above):  
\_\_\_\_\_  
\_\_\_\_\_

Court notices, correspondence, and phone calls to be directed to          Plaintiff          Agent          Attorney.

CASE NO. \_\_\_\_\_

## SERVICEMEMBERS CIVIL RELIEF ACT OF 2003 AFFIDAVIT

50 USC Sec. 520

Plaintiff being duly sworn on oath deposes\* and says that defendant(s)

\_\_\_\_\_ and \_\_\_\_\_ is (are)

(PLEASE CHECK ONE)

not in the military

not on active duty in the military and/or not in a foreign country on military service

on active military duty and/or is subject to the Servicemembers Civil Relief Act of 2003

has waived his/her rights under the Servicemembers Civil Relief Act of 2003

military status is unknown at this time

\_\_\_\_\_  
Signature of Plaintiff / Agent / Attorney (circle one)

Subscribed and sworn to before me on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Clerk of the Justice Court or Notary