

JUSTICE COURT CIVIL CASE INFORMATION SHEET (4/13)

CAUSE NUMBER (FOR CLERK USE ONLY): _____

STYLED

(e.g., John Smith v. All American Insurance Co; In re Mary Ann Jones; In the Matter of the Estate of George Jackson)

A civil case information sheet must be completed and submitted when an original petition is filed to initiate a new suit. The information should be the best available at the time of filing. This sheet, required by Rule of Civil Procedure 502, is intended to collect information that will be used for statistical purposes only. It neither replaces nor supplements the filings or service of pleading or other documents as required by law or rule. The sheet does not constitute a discovery request, response, or supplementation, and it is not admissible at trial.

1. Contact information for person completing case information sheet:		2. Names of parties in case:	
Name:	Telephone:	Plaintiff(s): _____ _____	
Address:	Fax:	_____ _____	
City/State/Zip:	State Bar No:	Defendant(s): _____ _____	
Email:		_____ _____	
Signature:		_____ _____	
[Attach additional page as necessary to list all parties]			
3. Indicate case type, or identify the most important issue in the case (select only 1):			
<input type="checkbox"/> Debt Claim: A debt claim case is a lawsuit brought to recover a debt by an assignee of a claim, a debt collector or collection agency, a financial institution, or a person or entity primarily engaged in the business of lending money at interest. The claim can be for no more than \$20,000, excluding statutory interest and court costs but including attorney fees, if any.	Eviction: An eviction case is a lawsuit brought to recover possession of real property, often by a landlord against a tenant. A claim for rent may be joined with an eviction case if the amount of rent due and unpaid is not more than \$20,000, excluding statutory interest and court costs but including attorney fees, if any.		
<input type="checkbox"/> Repair and Remedy: A repair and remedy case is a lawsuit filed by a residential tenant under Chapter 92, Subchapter B of the Texas Property Code to enforce the landlord's duty to repair or remedy a condition materially affecting the physical health or safety of an ordinary tenant. The relief sought can be for no more than \$20,000, excluding statutory interest and court costs but including attorney fees, if any.	<input type="checkbox"/> Small Claims: A small claims case is a lawsuit brought for the recovery of money damages, civil penalties, personal property, or other relief allowed by law. The claim can be for no more than \$20,000, excluding statutory interest and court costs but including attorney fees, if any.		

PETITION: SMALL CLAIMS CASE

CASE NO. (court use only) _____

In the Justice Court, Precinct _____,
El Paso County, Texas

PLAINTIFF _____

VS.

DEFENDANT(S): _____

Defendant(s) contact info: _____

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

RELIEF: Plaintiff seeks damages in the amount of \$ _____, and/or return of personal property as described as follows (be specific): _____, which has a value of \$ _____.

Additionally, plaintiff seeks the following:

SERVICE OF CITATION: Service is requested on defendants by personal service at home or work or by alternative service as allowed by the Texas Justice Court Rules of Court. Other addresses where the defendant(s) may be served are: _____.

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: _____.

Petitioner's Printed Name

Signature of Plaintiff or Attorney

DEFENDANT(S) INFORMATION (if known):

Address of Plaintiff's Attorney, if any, or Plaintiff if none

DATE OF BIRTH: _____

City

State

Zip

* LAST 3 NUMBERS OF DRIVER LICENSE: _____

* LAST 3 NUMBERS OF SOCIAL SECURITY: _____

DEFENDANT'S PHONE #: _____

phone & Fax No. of Plaintiff's Attorney, if any, or Plaintiff if none

Sworn to and subscribed before me this _____ day of _____, 20 _____.

Clerk of the Court or Notary



JUSTICE OF THE PEACE PRECINCT 6 PL. 1 EL PASO COUNTY, TEXAS

CASE NO. _____

Defendant's Name: _____
Nombre del Demandado

DOB: _____
Fecha de Nacimiento
SS#: XXX-XX-X _____
Numero de Seguro Social

AFFIDAVIT
SERVICEMEMBERS CIVIL RELIEF ACT SEC. 201 (b)
Declaracion Jurada
Sobre el acto de Proteccion SEC.201 (b) para miembros del servicio militar

PLAINTIFF BEING DULY SWORN ON HIS/HER OATH DEPOSES AND SAYS THAT DEFENDANT(S)
El demandante bajo juramento declara que los demandado (s)

- IS NOT IN THE MILITARY
No esta en los Servicios militares
- IS NOT ON ACTIVE DUTY IN THE MILITARY AND/OR
No esta en el servicio active en los militares y/o
- NOT IN A FOREIGN COUNTRY ON MILITARY SERVICE
No esta en pais extrajero en servicio militar
- IS ON ACTIVE MILITARY DUTY AND/OR IS SUBJECT TO THE SERVICE MEMBERS RELIEF ACT OF 2003.
Esta en deber military active y/o esta conforme el acto de la relevacion de los miembros del servicio de 2003.
- DEFENDANT HAS WAIVED HIS RIGHTS UNDER THE SERVICE MEMBERS RELIEF ACT OF 2003.
El demandado ha renunciado sus derechos bajo acto de la relevacion de los miembros del servicio de 2003.
- MILITARY STATUS IS UNKNOWN AT THIS TIME. _____
El estado military es desconocido en este tiempo.

PLAINTIFF SIGNATURE /Firma de Demandante

SUBSCRIBED AND SWORN TO BEFORE ME ON THIS _____ day of _____, 20____.

CLERK OF THE JUSTICE COURT/ NOTARY PUBLIC

*Penalty for making or using false affidavit – a person who makes or uses an affidavit knowing it to be false, shall be fined \$10,000.00 as provided in Title 18, United States Code, or imprisoned for not more than one year or both.

*La pena para hacer o usar la declaracion jurada falsa que una persona hace o que utiliza una declaracion jurada que sabe serf also. Sera multada \$10,000 en la Manera prevista en el titulo19 Estados Unidos cifr, o encarcelado para no mas que un ano,o ambos.

Military status can be verified through this website: www.dmdc.osd.mil/scra/owa/home

El estado military se puede verificar con esta pagina de internet: www.dmdc.osd.mil/scra/owa/home

PLAINTIFF

Vs

NO. _____

DEFENDANT

*This sheet must be completed at time of filing claim. In English or Spanish.

*Esta pagina necesita estar completa al tiempo de poner la demanda. En Ingles o Espanol.

I _____ acknowledge that if I need a certified translator at the time of trial. **I will be responsible for obtaining a translator certified by the state of Texas and the cost.**

Date: _____ Signature: _____
Date: _____ Clerk Signature: _____

Yo _____ reconosco que si necesito un traductor certificado por El Estado de Tejas. **Yo sere responsable por conseguir un traductor y el costo.**

Fecha: _____ Firma: _____
Fecha: _____ Firma de Oficinista: _____