

**SELF REPRESENTED LITIGANT  
PROCESS REQUEST FORM**

Cause No. \_\_\_\_\_

Style of Case: \_\_\_\_\_

Document(s) to be served:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Name of party to be served: \_\_\_\_\_

Address for service: \_\_\_\_\_

Name of party to be served: \_\_\_\_\_

Address for service: \_\_\_\_\_

Please select type of service :

Citation    Notice    Show Cause Notice    Temporary Restraining Order

Other: \_\_\_\_\_

**\*\*\*\*\*Check one of the options below for your preferred service method.\*\*\*\*\***

Hold issuance and service document(s) at the Clerk's office. It/they will be picked up at the front counter by: \_\_\_\_\_

Serve by Certified Mail

Serve by Matagorda County Sheriff/Constable

Serve by Publication through Office of Court Administration's Public Information Website.

Requestor's name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Requestor's email: \_\_\_\_\_

Please contact the District Clerk's office at (979) 244-7621 if you have any questions.