

REQUEST FOR RECORD FROM COURT REPORTER

DATE OF TRIAL/HEARING: _____

CAUSE NUMBER _____

Plaintiff(s)

IN THE COUNTY CIVIL COURT

VS.

AT LAW NO. FOUR (4)

HARRIS COUNTY, TEXAS

Defendant(s)

Please COMPLETE THE FOLLOWING or ATTACH YOUR BUSINESS CARD.

ATTORNEY FOR PLAINTIFF or SELF-REPRESENTED/PLAINTIFF:

Name: _____

Texas State Bar Number: _____

Telephone Number: _____

ATTORNEY FOR DEFENDANT or SELF-REPRESENTED DEFENDANT:

Name: _____

Texas State Bar Number: _____

Telephone Number: _____

AD LITEM:

Name: _____

Texas State Bar Number: _____

Telephone Number: _____

WITNESSES' NAMES:

