

Must be completed FRONT and BACK in blue or black ink and returned to office

WALKER COUNTY COURT COLLECTIONS

1301 Sam Houston Ave. Suite 111 Huntsville, TX 77340 collections@co.walker.tx.us
Collections Department 936 436-0220 OR 936 436-4935 Fax 936 436-0435

DOCKET / CAUSE # _____ COURT _____

LAST NAME	FIRST NAME	DATE OF BIRTH	DRIVER'S LICENSE/ID
MAILING ADDRESS		PHONE #	ALTERNATIVE PHONE #
CITY, STATE, ZIP CODE		SOCIAL SECURITY #	E-MAIL ADDRESS
JOB/EMPLOYER		WORK ADDRESS	WORK PHONE #

HOUSEHOLD INCOME (monthly)

SALARY

OTHER INCOME*

*SOURCE
(PARENTS, SPOUSE, SSI,
DISABILITY)

SAVINGS

CHILD SUPPORT*

*(YOU RECEIVE)

TOTAL

HOUSEHOLD EXPENSES (monthly)

RENT/MORTGAGE

INSURANCE

AUTO PAYMENT

ELECTRIC/GAS

PHONE

WATER/SEWER

CHILD CARE

CHILD SUPPORT*

*(YOU PAY)

FOOD

GASOLINE

PERSONAL EXPENSES*

(MEDICAL, CREDIT CARDS,
ETC.)

TOTAL

BANK INFORMATION:

CHECKING/SAVINGS
ACCOUNT(S):

BANK NAME ONLY

BALANCE

CREDITOR INFORMATION:

RENT/MORTGAGE:

COMPANY/OWNER

MO. PMNT

VEHICLE LOAN:

COMPANY/OWNER

MO. PMNT

CREDIT CARDS:

COMPANY

MIN. PMNT

