

Clyde Castleberry Company

P. O. Box 1187 – Covington, GA. 30015
Telephone: 770-787-1031 • FAX 770-787-2338

MAGISTRATE COURT FORMS – DOCKETS/ACCOUNTING SYSTEMS

CIVIL FORMS

<u>FORM #</u>	<u>DESCRIPTION</u>	<u>#/PKG</u>	<u>PRICE</u>	<u># OF PKGS ORDERED</u>	<u>TOTAL COST</u>
MAG-10	Statement of Claim (Inc. Verifica., Notice/Sum., Default Judgment)	100	40.00	_____	_____
MAG-11	Answer of Defendant(s) – Civil (2-part NCR)	100	46.00	_____	_____
MAG-12	Notice of Trial (3-part NCR)	100	48.00	_____	_____
MAG-13a	Default Judgment (3-part NCR)	100	48.00	_____	_____
MAG-13b	Consent Judgment (3-part NCR)	100	48.00	_____	_____
MAG-13c	Request for Dismissal (3-part NCR)	100	48.00	_____	_____
MAG-14	Foreclosure Personal Property	100	38.00	_____	_____
MAG-16	Application for Writ of Possession & Judgment	100	38.00	_____	_____
MAG-20	Affidavit for Summons of Dispossessory (Incl. Summons/Writ)	100	38.00	_____	_____
MAG-24	Writ of Fieri Facias (FiFA) form	100	38.00	_____	_____

CRIMINAL FORMS

MAG-50	Appl. Crim. Arrest Warrant – Green Border (Inc. Appl. Search War.)	100	32.00	_____	_____
MAG-52	State Warrant and Mittimus – Green Border	100	42.00	_____	_____

ACCOUNTING

MAG-70	Pegboard Receipts (1000/package) #1-1000		220.00	_____	_____
MAG-74	Pegboard Journal Receipts (100/package)		98.00	_____	_____

GENERAL FORMS

MAG-80	Witness Subpoena	100	34.00	_____	_____
SC-2	Sheriff's Entry of Service (3-part NCR)	100	48.00	_____	_____

DOCKETS

MAG-90	Civil Docket – Loose Leaf, 600 pages & index		340.00	_____	_____
MAG-90-1	Civil Docket #___ w/ ABME index & blank pages		278.00	_____	_____
MAG-94	Criminal Warrant Docket – Loose Leaf, 600 pages & index		340.00	_____	_____
MAG-96	Criminal Warrant Docket (Bound Book) 2 Cases/Page, 200 Pages, 14'BS x 8 ½"		468.00	_____	_____
MAG-98	Violation Docket – Loose Leaf, 600 pages & index		340.00	_____	_____

(Revised 1/21. Prices subject to change w/o notice)

Ordering Information

Ship Order to _____ County, Purchase Order No. _____ (if needed)

Commercial Accounts:

Company Name: _____

Mailing Address: _____

Shipping Address (if different): _____

City, State, Zip: _____

Phone (will be your account number): _____

****Sales Tax and Shipping Charges added to all orders when applicable**

Your Order may be:

Faxed to: (770) 787-2338

Mailed to: Clyde Castleberry Co., P.O. Box 1187, Covington, GA 30015

Called in: (770) 787-1031 for area codes (404)(678)(770), All others may call 1-800-222-1250

Emailed: clydecastleberrycompany@gmail.com

Order may be charged to credit card.

MasterCard Visa American Express Discover

Card Issued To: _____

Card Expiration Date: _____

Security Code:

Thank You!