







Electronic Filing System - State Fund

133.058(d), no service fees are allowed.

a T Code ■ 32480

You have certain rights under Chapters 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at

County Identification Number	d. Report for quarter ending (mm/dd/yy)	e.	f. Due date of report
Cou	nty name and mailing address		h. IMPORTANT Blacken this box if your address has changed. Show changes by the preprinted information. i. j.
statutory county court, or a statu- including an appeal, and on the f to be used as provided by Section	ectronic riling ree ed or required by law, the clerk of the supreme court, a cory probate court shall collect a \$30 fee on the filing of illing of any counterclaim, cross-action, intervention, int n 51.852 (assessed as \$20 prior to Sept. 1, 2015). RE te court, effective January 1, 2022.	any civil action erpleader, or thir	or proceeding requiring a filing fee, rd-party action requiring a filing fee
proceeding requiring a filing fee	ted or required by law, the clerk of a justice court shall, including an appeal, and on the filing of any count gree to be used as provided by Section 51.852. REPE	erclaim, cross-a	ction, intervention, interpleader, or
(d) Criminal costs REPEALED effe	ctive January 1, 2020. Costs assessed on offenses	s prior to Janua	ry 1st are still to be reported and

Filing Fees (Civil Cases)		
1. District Court filing fees (@ \$30)	1. = \$	
2. County Courts filing fees (Constitutional, Statutory and Statutory Probate Courts) (@ \$30)		
3. Justice Courts filing fees (@ \$10)		
4. Total amount of filing fees collected (All Courts)	4. = \$	
Criminal Costs on Convictions (\$5 in all courts - not assessed after Dec. 31, 2019)	5. ■\$	
5. District Court convictions		•
6. County Courts convictions (Constitutional and Statutory Courts)		•
7. Total amount of criminal costs collected (All Courts)		
8. TOTAL AMOUNT DUE (Add Items 4 and 7)	Ф	
40-151 *** DO NOT DETACH *** (Rev.11-21/6)		
9. TOTAL AMOUNT OF PAYMENT (Same as Item 8)	9. = \$	•
County name k.		I.
T Code ■ County identification no. ■ Period		I L

For assistance call 800-531-5441, ext. 3-4276, or 512-463-4276.

P.O. Box 149361 Austin, TX 78714-9361

Complete this report and make the amount in Item 9 payable to: **State Comptroller** Mail to: Comptroller of Public Accounts

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Authorized agent

sign here

Daytime phone (Area code and number)