

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

v.

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IN THE DISTRICT COURT OF  
COUNTY, TEXAS  
506<sup>TH</sup> JUDICIAL DISTRICT

**SETTING REQUEST**

Prior to completing this Setting Request form, see [www.court506.com](http://www.court506.com) for additional information, dates and procedures. Contact the Court Coordinator for additional information.

TYPE OF SETTING REQUESTED:

REQUESTED DATE OF SETTING:

ESTIMATED AMOUNT OF COURT TIME REQUIRED:

REQUESTING ATTORNEY:

Name:

Address:

Phone/Fax:

Email:

ALL OTHER ATTORNEYS OF RECORD (& pro se parties)(add pages as needed):

Name:

Address:

Phone/Fax:

Email:

I certify that discussions of the matter to be set have been held or would not be productive. I certify that I have made reasonable efforts to coordinate the date of this request prior to submission of this request. I certify that a copy of this setting request has been delivered to all other attorneys & pro se parties in accordance with the Rules.

Dated:

\_\_\_\_\_  
Signature of Requesting Attorney/Party