

CAUSE NO. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
VS.  
\_\_\_\_\_  
\_\_\_\_\_

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§  
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§  
§

IN THE \_\_7<sup>TH</sup> DISTRICT COURT  
OF  
FREESTONE COUNTY, TEXAS

**SETTING REQUEST**

**TYPE OF SETTING REQUESTED:**

\_\_\_\_\_ Hearing on Motions(s) for: \_\_\_\_\_  
\_\_\_\_\_ Pre-Trial hearing  
\_\_\_\_\_ Bench Trial  
\_\_\_\_\_ Jury Trial  
\_\_\_\_\_ Other \_\_\_\_\_

**REQUESTED SETTING DATE:** \_\_\_\_\_

**ESTIMATED AMOUNT OF COURT TIME REQUIRED:** \_\_\_\_\_

**REQUESTING ATTORNEY:**

Name: \_\_\_\_\_ (plaintiff/ defendant)  
Address: \_\_\_\_\_ (plaintiff/ defendant)  
\_\_\_\_\_ (Please Specify One)  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**ALL OTHER PARTIES TO ACTION:** (attorneys of record or unrepresented parties):

Name: \_\_\_\_\_ (plaintiff/ defendant)  
Address: \_\_\_\_\_ (plaintiff/ defendant)  
\_\_\_\_\_ (Please Specify One)  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

I certify that discussions of the matter to be set have been held or would not be productive and without requesting a setting a disposition will not likely occur.

I certify that a copy of this setting request has been mailed/ delivered to all other attorneys/ parties of record.

Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Requesting Attorney  
State Bar No: \_\_\_\_\_

Original to: Letha Willis  
Freestone District Court Coordinator  
118 E. Commerce St. Suite 205  
Fairfield Texas 75840  
(903) 389-4836 fax: (903) 389-3839