

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

\_\_\_\_\_  
§ IN THE COUNTY COURT AT LAW  
\_\_\_\_\_  
§  
\_\_\_\_\_  
§ OF  
\_\_\_\_\_  
§ WALKER COUNTY, TEXAS

CONFIRMATION OF HEARING

TYPE OF HEARING:

- Oral Hearing/Bench Trial on \_\_\_\_\_
- Submission on \_\_\_\_\_
- Jury Trial with Pretrial Hearing on \_\_\_\_\_ at 9:00 A.M.

DATE OF SETTING: \_\_\_\_\_, 20\_\_\_\_ AT 9:00 A.M.

\*\*\*CALL THE COURT TO OBTAIN A DATE\*\*\*

ESTIMATED AMOUNT OF TIME REQUIRED: \_\_\_\_\_  minutes  hours  days

REQUESTING ATTORNEY OR PRO SE PARTY:

\*\*\*It is your responsibility to give proper notice to all parties\*\*\*

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY/ST/ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

ALL OTHER ATTORNEYS OF RECORD/PRO SE PARTIES NOTIFIED:

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I CERTIFY THAT A COPY OF THIS SETTING REQUEST HAS BEEN MAILED/DELIVERED TO ALL OTHER ATTORNEYS/PARTIES OF RECORD.

\_\_\_\_\_  
SIGNATURE OF REQUESTING ATTORNEY DATE