Cause No: _____

State of Texas § In the County Court

County of Brazos § at Law # _____

SETTING REQUEST – PROBATE/GUARDIANSHIP

Estate/Guardianship of:

_____

TYPE OF SETTING REQUESTED:

_____ Letters Testamentary/Muniment of Title

_____ Administration (Independent/Dependent)

_____ Guardianship

_____ Jury Trial

_____ Bench Trial

_____ Other _____

Estimated amount of time required by both sides _____ (minutes, hours, days)

IF OPPOSING COUNSEL DISAGREES WITH TIME ESTIMATED, WRITTN OBJECTIONS MUST BE EFILED WITHIN TEN (10) DAYS FROM THE DAGE BELOW: TIME WILL BE DIVIDED EQUALLY BETWEEN COUNSEL/PARTIES.

REQUESTING ATTORNEY OR UNREPRESENTED PARTIES:

Name: _____
Address: _____
Phone Number: _____
Email: _____

ALL OTHER ATTORNEYS OF RECORD OR UNREPRESENTED PARTIES TO BE NOTIFIED:

Name: _____ Name: _____
Address: _____ Address: _____
Phone #: _____ Phone #: _____

**Week of Preference (give Monday date of commencing week)

1st Choice _____ 2nd Choice _____ 3rd Choice _____

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

_____ _____ _____

Signature Date State Bar # if Applicable