

**CIVIL CASE SETTING REQUEST FORM
JIM WELLS COUNTY COURT AT LAW**

Date: _____

Cause No. & Style: _____

Type of Setting Request: _____

Estimated Total Court Time: _____

Requesting Attorney/Party:

Name: _____

Party Represented: _____

Address: _____

Telephone No.: _____

Email: _____

Name and Address of all other Attorneys of Record or unrepresented Parties (use additional sheets if necessary):

Name: _____

Party Represented: _____

Address: _____

Telephone No.: _____

Email: _____

Dates Requested:

1st Choice: _____

2nd Choice: _____

I certify that a copy of this setting request has been delivered to all other parties of record. I further certify that I have consulted with all other parties and the above requested dates are agreeable to all parties or I have made all reasonable efforts to obtain an agreement on an agreed setting date but an agreement could not be reached.

Date: _____

Requesting Attorney or Party

Email: countycourtatlaw@co.jim-wells.tx.us

or Mail to: County Court at Law
Jim Wells County
200 N. Almond St., Suite B-111
Alice, Texas 78332

Name and Address of all other Attorneys of Record or unrepresented Parties:

Name: _____

Party Represented: _____

Address: _____

Telephone No.: _____

Email: _____

Name: _____

Party Represented: _____

Address: _____

Telephone No.: _____

Email: _____

Name: _____

Party Represented: _____

Address: _____

Telephone No.: _____

Email: _____