

Cause No: _____

IN THE MATTER OF THE MARRIAGE OF

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IN THE COUNTY COURT AT LAW

AND

AND IN THE INTEREST OF

OF

GRIMES COUNTY, TEXAS

TRIAL SETTING REQUEST

Jury Non-Jury

YOU MUST EMAIL THE COURT COORDINATOR AT CCL@CO.GRIMES.TX.US TO REQUEST A TRIAL DATE. YOU WILL RECEIVE CONFIRMATION OF THIS TRIAL SETTING FROM THE COURT. THE RESPONSIBILITY OF THE ATTORNEY REQUESTING THE TRIAL SETTING TO GIVE PROPER NOTICE TO OPPOSING COUSEL, THE PARTIES AND ANY AD LITEMS.

Please set the above entitled and numbered cause for trial on the merits on the _____ day of _____, 20____ at 9:00 a.m. **(CALL THE COURT TO OBTAIN A DATE)**

A pre-trial conference is set for the _____ day of _____, 20____, at 9:00 a.m.

In accordance with the Rules of the County Court at Law of Grimes County, Texas, I, hereby certify the following:

- (a) That a good faith attempt has been made to ascertain a mutually convenient date for trial;
- (b) That all necessary inventories and appraisements will be filed or exchanged per the Local Rules;
- (c) That the estimated time necessary for all parties to present their case is _____ (minutes, hours, days);
- (d) That the pleadings, and service thereof, are in order;
- (e) That counsel upon whom the request for setting is served has not withdrawn from the case;
- (f) That all necessary ad litem appointments have been made;
- (g) That all parties and counsel of record will be supplied with copies of this request for setting;
- (h) That all provisions of the Local Rules have been or will be complied with;
- (i) That the case will be mediated prior to trial.
- (j) That the Trial Preparation Order will be complied with;

X _____
Signature of Party Making Request and Certification Today's Date

LIST ALL OTHER ATTORNEYS OF RECORD ON REVERSE SIDE OF FORM. BE SURE TO INCLUDE ALL AD LITEMS AND PRO SE PARTIES. You must be able to prove that all attorneys, ad litem, amicus, and pro se parties received a copy of this Trial Setting Request form in accordance with the Rules of Civil Procedure.

_____ Petitioner's Attorney	_____ Respondent's Attorney
_____ Firm Name	_____ Firm Name
_____ Address	_____ Address
_____ City, State, Zip	_____ City, State, Zip

Attorney/Pro Se Name

Attorney/Pro Se Name

Firm Name

Firm Name

Address

Address

City, State, Zip

City, State, Zip

Amicus/Ad Litem Name

Amicus/Ad Litem Name

Firm Name

Firm Name

Address

Address

City, State, Zip

City, State, Zip

IMPORTANT

**IT IS THE RESPONSIBILITY OF THE ATTORNEY OR
PRO SE PARTY REQUESTING THE TRIAL SETTING TO
GIVE PROPER NOTICE TO THE PARTIES**

**YOU MUST BE ABLE TO PROVE THAT ALL
ATTORNEYS, AD LITEMS, AMICUS AND PRO SE
PARTIES RECEIVED A COPY OF THIS TRIAL SETTING
REQUEST FORM IN ACCORDANCE WITH THE RULES
OF CIVIL PROCEDURE**