## USE THIS PAGE TO SUPPLEMENT SETTING REQUEST FOR ADDITIONAL ATTORNEYS/PARTIES

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 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 SETTING REQUEST FORM IN ACCORDANCE WITH THE RULES OF CIVIL PROCEDURE