

Cause No: _____

_____) (In the District Court
_____) (_____ Judicial District
_____) (_____ County, Texas

Infectious Disease Protocol Reset
Motion in the 36th, 156th and 343rd District Court

1. The above case is set on: _____, 2020 @ _____ am/pm for a
_____) Arraignment
_____) Pre-Trial
_____) Final Hearing
_____) Jury Trial
_____) Sentencing
_____) other, please state what hearing is scheduled: _____

2. A re-set of the above case is hereby requested because:

_____ (name) *IS ILL* and they are:
_____) a Party to this case;
_____) an Attorney of record in this case;
_____) a necessary witness in this case;
_____) other, please state relationship to the case: _____

3. The undersigned hereby affirms that they have consulted with opposing counsel or the opposition and :

_____) There is no opposition to this request; or
_____) This request is opposed by: _____.

Signed this the _____ day of _____, 20__.

_____, Movant SBN: _____

_____, Address

_____ phone number

_____ email address