CAUSE NO.\_\_\_\_\_\_\_\_\_\_\_\_

PLAINTIFF NAME §            IN THE DISTRICT COURT

§

VS. §                        ­\_\_\_\_ JUDICIAL DISTRICT

§

DEFENDANT NAME § \_\_\_\_ COUNTY, TEXAS

**JOINT MOTION TO DISCHARGE RECEIVER**

This Joint Motion to Discharge Receiver \_\_\_\_\_\_\_\_\_\_\_\_ (*Receiver’s name*) is brought by \_\_\_\_\_\_\_\_\_\_\_ (*Plaintiff’s name*), Plaintiff, and \_\_\_\_\_\_\_\_\_\_\_\_ (*Defendant’s name*) Defendant, who show in support:

1. Pursuant to prior orders in this case, \_\_\_\_\_\_\_\_\_\_\_\_ (*Receiver’s name*) was appointed as Receiver in this cause to \_\_\_\_\_\_\_\_\_\_\_ (*description of powers granted to Receiver*).
2. (*Reason Receivership Estate is to be dissolved – eg. Mediated Settlement Agreement, Settlement Agreement, Order of the Court*)

\_\_\_\_\_\_\_\_\_\_\_\_ (*Plaintiff’s name*) and ­\_\_\_\_\_\_\_\_\_\_ (*Defendant’s name*) pray that the Court grant this Motion.

Respectfully submitted,

*(Firm Name)*

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (s*ignature)*

*Attorney Name*

*Address*

*Phone Number*

*State Bar ID*

Attorney for Plaintiff

*(Firm Name)*

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (s*ignature)*

*Attorney Name*

*Address*

*Phone Number*

*State Bar ID*

Attorney for Defendant