

		CASE NUMBER:	
			
Plaintiff(s) Name / Address / Email / Phone	D	efendant(s) Name / Address / Email / I	Phone
If you fail to appear or fail to produce said docu			
APPEARANCE OF A PERSON for Attendance of	Witness(es) at Hearing of	or Trial	
To:			Phone:
Address:			
YOU ARE COMMANDED to appear in the above n A Trial in the above cause on behalf of the A Hearing Date:			estify at:
YOU ARE TO RE Be in court a YOU MUST CHECK IN AT TH	EMAIN UNTIL EXCUSED at least 15 minutes before IE FRONT COUNTER BE al por lo menos 15 minutos antes	the scheduled hearing. FORE ENTERING THE (s de la audiencia programada.)	
EQUESTS FOR REASONABLE ACCOMMODATION			,
(LAS SOLICITUDES PARA ARREGLOS O ADAPTACIONES RAZO	AS POSSIBLE	ON DISCAPACIDADES SE DEBL	
If an interpreter is needed, please (En caso de necesitarse un intérprete, favor de comuni	e contact the court listed icarse con el Tribunal antes men	above to request an interp cionado para solicitar que se brin	reter be provided. den los servicios de un intérprete.)
DUCES TECUM for Production of Documents (No	t allowed in Small Claims)	
To:Custo	odian of Records		
☐ YOU ARE COMMANDED to produce and/or perr below (or attached) which may include electronic.	mit inspection, copying, te		
☐ YOU ARE ORDERED TO PROVIDE copies of th time, at the address specified below or as other a			esting party on or before the date and
Place, date, and time of production or inspection: Address:			Phone:
	Time:		1 116116
YOUR APPEARANCE IS NOT REQUIRED if the party within the time allowed.			o the requesting
ate:			
ate: Justice of the Peace			
AFF	FIDAVIT OF SERVICE		
Date served: Time served:	_ Who served: Address of service:		
I certify and declare under penalty of perjury that I 18 years of age.	served this subpoena, th	nat I am not a party to this	matter and, that I am not less than
Signature of person serving process			