

**COUNTY COURT, PINELLAS COUNTY, FLORIDA
SMALL CLAIMS DIVISION**

UCN: _____ Reference No.: _____

_____ Plaintiff(s)

vs.

_____ Defendant(s)

SUBPOENA

THE STATE OF FLORIDA:

TO:

YOU ARE HEREBY COMMANDED to appear before the Honorable _____ ,
Judge of the Court, at the Pinellas County Courthouse in _____ , Florida,
on _____ , 20 _____ , at _____ M., to testify in this action. If you fail to appear, you may
be in contempt of Court.

You are subpoenaed to appear by the following attorney and unless excused from this subpoena by this
attorney or the Court, you shall respond to this subpoena as directed.

WITNESS my hand and the seal of this Court on _____ , 20 _____ .

(SEAL)

KEN BURKE

Clerk of the Circuit Court

By: _____

Deputy Clerk

Attorney for Plaintiff/Defendant

Address

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the Human Rights Office, 400 S. Ft. Harrison Ave., 5th floor, Clearwater, FL 33756, (727) 464-4062 (V/TDD), at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.