

\_\_\_\_\_  
Plaintiff(s),

vs.

\_\_\_\_\_  
Defendant(s).

IN THE \_\_\_\_\_ COURT, \_\_\_\_\_  
JUDICIAL CIRCUIT, IN AND FOR  
\_\_\_\_\_ COUNTY, FLORIDA

Case No. \_\_\_\_\_

Division: \_\_\_\_\_

**SUBPOENA DUCES TECUM FOR DEPOSITION**

THE STATE OF FLORIDA:

TO: \_\_\_\_\_

YOU ARE COMMANDED to appear before a person authorized by law to take depositions at \_\_\_\_\_ in \_\_\_\_\_, Florida, on \_\_\_\_\_, at \_\_\_\_\_ (a.m./p.m.), for the taking of your deposition in this action and to have with you at that time and place the following: \_\_\_\_\_.

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 must respond to this subpoena as directed.

DATED on \_\_\_\_\_

RONNIE FUSSELL  
Clerk of the Court

\_\_\_\_\_  
Party/Attorney  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone No.: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

By: \_\_\_\_\_  
As Deputy Clerk

Any minor subpoenaed for testimony has the right to be accompanied by a parent or guardian at all times during the taking of testimony notwithstanding the invocation of the rule of sequestration of section 90.616, Florida Statutes, except on a showing that the presence of a parent or guardian is likely to have a material, negative impact on the credibility or accuracy of the minor's testimony, or that the interests of the parent or guardian are in actual or potential conflict with the interests of the minor.

**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 [identify applicable court personnel by name, address, and telephone number] 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.**

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DATED on \_\_\_\_\_

\_\_\_\_\_  
Party/Attorney

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone No.: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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