

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR MIAMI-DADE COUNTY, FLORIDA.  
 IN THE COUNTY COURT IN AND FOR MIAMI-DADE COUNTY, FLORIDA.

<b>DIVISION</b> <input type="checkbox"/> CIVIL <input type="checkbox"/> FAMILY <input type="checkbox"/> DISTRICTS <input type="checkbox"/> OTHER	<b>SUBPOENA FOR DEPOSITION</b>	<b>CASE NUMBER</b>
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<b>PLAINTIFF(S)/PETITIONER</b>  	<b>VS. DEFENDANT(S)/RESPONDENT</b>  	<b>SERVICE</b>  
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<p><b>THE STATE OF FLORIDA:</b></p> <p><b>TO:</b> _____</p> <p><b>YOU ARE COMMANDED</b> to appear before a person authorized by law to take depositions at _____</p> <p>_____</p> <p>_____</p> <p>in _____, Florida, on _____, 20____, at ____m, for the taking of your deposition in this action.</p> <p><b>IF YOU FAIL TO APPEAR, YOU MAY BE IN CONTEMPT OF COURT.</b></p> <p>You are subpoenaed to appear by the following attorneys: _____, and unless excused from this subpoena by these attorneys or the Court, you shall respond to this subpoena as directed.</p>	<b>CLOCK IN</b>
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<b>HARVEY RUVIN CLERK OF COURTS</b>	BY: _____ DEPUTY CLERK	DATE
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Attorney for: _____ Address: _____ _____ Florida Bar No.: _____	(Court Seal)
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**AMERICANS WITH DISABILITIES ACT OF 1990  
ADA NOTICE**

**“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 Eleventh Judicial Circuit Court’s ADA Coordinator, Lawson E. Thomas Courthouse Center, 175 NW 1<sup>st</sup> Ave., Suite 2400, Miami, FL 33128, Telephone (305) 349-7175; TDD (305) 349-7174; Email [ADA@jud11.flcourts.org](mailto:ADA@jud11.flcourts.org); Fax (305) 349-7355 at least seven (7) days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than seven (7) days; if you are hearing or voice impaired, call 711.”**