

STATE OF TENNESSEE
WILLIAMSON COUNTY
JUVENILE COURT
PETITIONER

SUBPOENA
(ORDER TO APPEAR)

IN THE MATTER OF:
LEGAL FILE #

RESPONDENT

VS.

TO: (Name, Address & Telephone Number of Witness)

You are hereby commanded to appear at the time, date and place specified for the purpose of giving testimony. In addition, if indicated, you are to bring the items listed. If you fail to obey this subpoena, you may be held in contempt, punishable by a fine of up to \$50.00 and/or imprisonment for up to 10 days.

THE FAILURE TO SERVE A WRITTEN OBJECTION WITHIN TWENTY-ONE DAYS OF SERVICE OF THE SUBPOENA WAIVES ALL OBJECTIONS TO THE SUBPOENA, EXCEPT THE RIGHT TO SEEK THE REASONABLE COST FOR PRODUCING BOOKS, PAPERS, DOCUMENTS, ELECTRONICALLY STORED INFORMATION, OR TANGIBLE THINGS.

TIME	DATE	ITEMS TO BRING:
PLACE	Juvenile Court of Williamson County John I. Easley Criminal Justice Center 408 Century Court Franklin, Tennessee 37064 (OR)	<input type="checkbox"/> Additional List Attached
This subpoena is being issued on behalf of <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Defendant		DATE ISSUED:
Attorney: (Name, Address & Telephone Number)		Margaret Gurley Mahew, Juvenile Court Clerk BY: _____ Clerk or Deputy Clerk

RETURN ON SERVICE

Check one: Box 1 or Box 2 is only for the return by an authorized officer, an attorney, or by an attorney's agent; the return by an attorney or the attorney's agent must be sworn to/ Box 3 is only for the person who acknowledges service, and such person must sign in the signature box below.

1) I certify that on the date indicated below I served a copy of this subpoena on the witness stated above by: _____

2) I failed to serve a copy of this subpoena on the witness because _____

3) I acknowledge being served with this subpoena on the date indicated below: _____

DATE OF SERVICE: _____

SIGNATURE OF WITNESS, OFFICER OR ATTORNEY: _____

For ADA assistance, please call ADA coordinator: 615-790-5814