

Plaintiff or Filing Attorney Information:

Name _____

NJ Attorney ID Number _____

Address _____

Telephone Number _____

Superior Court of New Jersey

_____ Division _____ County

_____ Part

Docket No. _____

_____,
Plaintiff,

v.

_____,
Defendant.

CIVIL ACTION

Subpoena Ad Testificandum

STATE OF NEW JERSEY TO: _____

YOU ARE HEREBY COMMANDED to appear in person before the Superior Court of New Jersey, _____ Division, _____ County, _____ Part, at the Court House located at _____ on _____ at _____ a.m./ p.m. and there to testify as a witness in the above-captioned matter.

Failure to appear or comply with the command of this Subpoena will subject you to the penalties provided by law.

Dated: _____

Michelle M. Smith, Clerk of the Superior Court

PROOF OF SERVICE

I, _____, being over the age of 18, served the attached subpoena by delivering a copy to _____ at _____ and by handing him/her the fee of \$2.00 for one day's attendance and, if applicable, a mileage fee of \$_____, as allowed by law.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Date _____

Signature _____