

Plaintiff or Filing Attorney Information:

Name _____

NJ Attorney ID Number _____

Address _____

Email Address _____

Telephone Number _____

Superior Court of New Jersey
_____ Division _____ County

_____ Part
Docket Number _____

_____,
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 them 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