

STATE OF HAWAII FAMILY COURT SECOND CIRCUIT	SUBPOENA PROOF OF SERVICE	CASE NUMBER FC-____ NO. _____
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<p>THE STATE OF HAWAII TO:</p> <p>YOU ARE COMMANDED to appear in the Family Court of this circuit at the date, time and place indicated below to testify on behalf of:</p> <p>_____</p> <p><input type="checkbox"/> You are further ordered to bring with you the items listed in the comments section on the right.</p> <table border="1" data-bbox="142 871 938 1302"> <tr> <td data-bbox="142 871 592 982">DATE:</td> <td data-bbox="592 871 938 982">TIME:</td> </tr> <tr> <td colspan="2" data-bbox="142 982 938 1192"> PLACE: FAMILY COURT, SECOND CIRCUIT Hoapili Hale, Courtroom _____ 2145 Main Street, Third Floor Wailuku, Hawaii </td> </tr> <tr> <td colspan="2" data-bbox="142 1192 938 1302">REPORT TO:</td> </tr> </table>	DATE:	TIME:	PLACE: FAMILY COURT, SECOND CIRCUIT Hoapili Hale, Courtroom _____ 2145 Main Street, Third Floor Wailuku, Hawaii		REPORT TO:		<p>COMMENTS:</p>
DATE:	TIME:						
PLACE: FAMILY COURT, SECOND CIRCUIT Hoapili Hale, Courtroom _____ 2145 Main Street, Third Floor Wailuku, Hawaii							
REPORT TO:							

DATE	CLERK OF THE COURT
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PROOF OF SERVICE

SERVICE WAS MADE:	DATE:	TIME:	PLACE:	
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DATE	SIGNATURE OF SERVING OFFICER
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In accordance with the Americans with Disabilities Act and other applicable state and federal laws, if you require a reasonable accommodation for a disability, please contact the ADA Coordinator at the Family Court Administration Office at PHONE NO. 244-2700, FAX 244-2704 OR TTY 244-2889 at least ten (10) working days prior to your hearing or appointment date. For all Civil related matters, please call 244-2706 or visit the Service Center at 2145 Main Street, Room 141, Wailuku, HI 96793