

Name, Address & Phone Number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Plaintiff/Petitioner, Pro Se
- Defendant/Respondent, Pro Se
- Attorney for Plaintiff/Petitioner
- Attorney for Defendant/Respondent

**IN THE FAMILY COURT OF THE FIFTH CIRCUIT  
STATE OF HAWAI`I**

	)	CASE NO. _____
	)	
Plaintiff/Petitioner,	)	<b>SUBPOENA</b>
	)	<input type="checkbox"/> <b>NOTICE TO APPEAR</b>
vs.	)	<input type="checkbox"/> <b>SUBPOENA DUCES TECUM;</b>
	)	
	)	
Defendant/Respondent.	)	

**SUBPOENA  NOTICE TO APPEAR  SUBPOENA DUCES TECUM**

**THE STATE OF HAWAI`I TO: ANY OFFICER AUTHORIZED BY LAW TO SERVE SUPOENAS IN**

**THE STATE OF HAWAI`I YOU ARE COMMANDED** to subpoena the individual named below.

NAME AND ADDRESS OF WITNESS:

**DATE:** \_\_\_\_\_

**TIME:** \_\_\_\_\_

**PLACE:** FAMILY COURT, FIFTH CIRCUIT  
3970 Ka`ana Street  
Lihu`e, Kaua`i, Hawai`i 96766  
Courtroom No. \_\_\_\_\_

Note:

WITNESS, YOU ARE COMMANDED to appear at the place and date and time indicated and any date thereafter until discharged by the Court to testify as a witness on behalf of the:

- PLAINTIFF/PETITIONER
- DEFENDANT/RESPONDENT
- You are further ordered to bring with you the items listed in the comments section below.

DISOBEDIENCE of this subpoena may be punished as contempt by this court.

COMMENTS:

DATE ISSUED: \_\_\_\_\_

\_\_\_\_\_  
Clerk's Signature

**Americans with Disabilities Act Notice**



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

Call (808) 482-2347 FAX (808) 482-2509 OR Send an e-mail to: [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov). The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.

Name, Address & Phone Number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Plaintiff/Petitioner, Pro Se
- Defendant/Respondent, Pro Se
- Attorney for Plaintiff/Petitioner
- Attorney for Defendant/Respondent

**IN THE FAMILY COURT OF THE FIFTH CIRCUIT  
STATE OF HAWAII**

	)	CASE NO. _____
	)	
Plaintiff/Petitioner,	)	<b>SUBPOENA / SUBPOENA DUCES TECUM</b>
	)	<b>PROOF OF SERVICE</b>
vs.	)	
	)	
	)	
Defendant/Respondent.	)	

**PROOF OF SERVICE**

**SERVICE WAS MADE:**

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

PLACE: \_\_\_\_\_

DOCUMENT SERVED: \_\_\_\_\_

SUBPOENA SERVED UPON: \_\_\_\_\_

**COMMENTS:**

DATE	PRINTED NAME OF SERVER	SIGNATURE OF SERVER

**PLEASE EXPEDITE PROOF OF SERVICE TO FAMILY COURT**