

IN THE CIRCUIT/COUNTY COURT, SECOND JUDICIAL CIRCUIT
IN AND FOR LEON COUNTY, FLORIDA

_____,
Petitioner/Plaintiff,

v.

Case #: _____

_____,
Respondent/Defendant.

NOTICE OF HEARING

TO: _____

There will be a hearing before Judge _____ on
_____, 20____, at _____ .m., in Room _____, of the Leon County
Courthouse, on the _____'s (*select Petitioner/Plaintiff or Respondent/Defendant*)
_____ (*document on which the hearing is being held*). _____
minutes have been reserved for this hearing.

If you are represented by an attorney, or plan to retain an attorney for this matter,
you should notify the attorney of this hearing.

Party's Signature

Party's Printed Name

Party's Street Address

Party's City/State/Zip

Party's Zip Code & Telephone Number

Certificate of Service

I HEREBY CERTIFY that a copy of the above has been furnished by U.S. Mail
to _____, at _____, _____, on
this ____ day of _____, 20__.

Party's Signature

IF YOU ARE A PERSON WITH A DISABILITY WHO NEEDS ANY ACCOMMODATION IN ORDER TO PARTICIPATE IN THIS PROCEEDING, YOU ARE ENTITLED, AT NO COST TO YOU, TO THE PROVISION OF CERTAIN ASSISTANCE. PLEASE CONTACT THE ADA COORDINATOR, COURT ADMINISTRATION, 301 S. MONROE ST., ROOM 225, TALLAHASSEE, FL 32301, (850) 606-4401, AT LEAST 7 DAYS BEFORE YOUR SCHEDULED COURT APPEARANCE, OR IMMEDIATELY UPON RECEIVING THIS NOTIFICATION IF THE TIME BEFORE THE SCHEDULED APPEARANCE IS LESS THAN 7 DAYS. IF YOU ARE HEARING OR VOICE IMPAIRED, CALL 711.