IN THE JUVENILE COURT OF _____ COUNTY, GEORGIA

In the Interest of:		Case Number:		
	 renile.	Sex: _	DOB:	Age:
-	SUBPOENA FO	OR THE PRODUCTI	ON OF EVIDEN	ICE
то:	(Name)(Address)(Phone Number, if known)			
GRE	ETINGS:			
 of	YOU ARE HEREBY COMM Juvenile Court of Co Judge County Cou, 20 You are further REQUIRE	ounty, Georgia, for a he of the Juvenile C urthouse at D AND ORDERED	caring in the above Court, in Roomo'clock to bring with yo	e-styled case and before of the M. on the day ou into said Court the
follov	ving:			
				to be used
acting	dence in the above-styled case This subpoena shall remain is g on behalf of the Court. HEREIN FAIL NOT, under the mement in the county jail. WITNESS,	n effect until you are gr	nis Court, includin	ng a fine and/or possible
		Clerk/Deputy Clerk		
		Juvenile Court of	County, C	jeorgia.
and le	I have, this day of _eaving the same with		rved the within su	
		Authorized Signature	Badge #	

*** If you have any questions, please contact (XXX) XXX-XXXX ***