



IN THE STATE COURT OF CLAYTON COUNTY, GEORGIA

MAILING ADDRESS: 9151 TARA BOULEVARD, ROOM 1CL181, JONESBORO, GEORGIA 30236

Tiki Brown, Clerk of Court

www.claytoncountyga.gov · Phone (770) 477-3388 · FAX: (770) 472-8159

Plaintiff

**CIVIL ACTION
FILE NO.** _____

vs.

Defendant

WITNESS SUBPOENA

To: _____
Address: _____

YOU ARE HEREBY COMMANDED, that laying all other business aside you be in and appear at the State Court of Clayton County, in Courtroom _____, before the Honorable _____ at _____, on the _____ day of _____, 20____, and there be sworn as a witness for the ___Plaintiff or ___ Defendant.

Further, you are required to attend from day to day and from term to term until this matter is disposed.

HEREIN FAIL NOT under penalty of the law by the authority of the Honorable Judges of State Court of Clayton County, Georgia.

This _____ day of _____, 20_____.

*If you have questions, please contact
the requesting attorney, named below:*

Name _____

Address _____

Telephone _____

By: _____
Signature of person authorized by law to sign subpoena
pursuant to O.C.G.A. §24-13-21