

**BIBB COUNTY SUPERIOR  
REQUEST FOR SUBPOENAS**

\_\_\_\_\_  
Plaintiff

VS.

Case No. \_\_\_\_\_

\_\_\_\_\_  
Defendant

Judge Assigned : \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ A.M./P.M.

Witness For: \_\_\_\_\_

**NAME/ADDRESS OF WITNESS(ES)**

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**REQUESTD BY:**

**Attorney/Pro Se:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_