

**IN THE CIRCUIT/COUNTY COURT OF THE SEVENTH JUDICIAL CIRCUIT
IN AND FOR VOLUSIA COUNTY, FLORIDA**

Plaintiff(s),
v. Case No. _____

Defendant(s).
_____ /

Notice of Hearing [fill in all blanks]

TO: {name of other party} _____

There will be a hearing before Judge {name} _____, on
{date} _____, at {time} _____ m., in Room _____ of the Courthouse, located at:
{address} _____ on the following issues:

- Motion to Determine Confidentiality of Court Records
- Motion to Determine Confidentiality of Court Records – Special criminal records
- Motion to Vacate or Open Court Records to the Public
- Other: _____.

CERTIFICATE OF SERVICE

I certify that the original was filed with the Clerk of the Court and that a copy of this document was furnished by () U.S. mail () hand delivery or () facsimile to [include all parties and affected non-parties] _____
_____ on _____, 20_____.

Signature of Person Requesting Hearing
Printed name _____
Address _____
Phone number _____
Fax number _____
Florida Bar No. _____



REQUESTS FOR ACCOMMODATIONS BY PERSONS WITH DISABILITIES If you are a person with a disability who needs an accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Court Administration, 101 N. Alabama Ave., Ste. D-305, DeLand, FL 32724 (386) 257-6096, at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the appearance is less than 7 days; if you are hearing or voice impaired, call 711.

THESE ARE NOT COURT INFORMATION NUMBERS



SOLICITUD DE ADAPTACIONES PARA PERSONAS CON DISCAPACIDADES

Si usted es una persona con discapacidad que necesita una adaptación para poder participar en este procedimiento, usted tiene el derecho a que se le proporcione cierta asistencia, sin incurrir en gastos. Comuníquese con la Oficina de Administración Judicial (Court Administration), 101 N. Alabama Ave., Ste. D-305, DeLand, FL 32724 (386) 257-6096, con no menos de 7 días de antelación de su cita de comparecencia ante el juez, o de inmediato al recibir esta notificación si la cita de comparecencia está dentro de un plazo menos de 7 días; si usted tiene una discapacidad del habla o del oído, llame al 711.

ESTOS NUMEROS TELEFONICOS NO SON PARA OBTENER INFORMACION JUDICIAL