

1 [Firm Name]  
[Firm Address]  
2 [Firm Phone Number]  
[Firm Fax]  
3 [Firm Email]  
[Attorney Name and Bar Number]  
4 Attorney for Plaintiff(s)

5 [State Trial Court System], [Location] County

6 **[Plaintiff Name(s)],**

Case No.

7 Plaintiff(s),

**SUMMONS**

8 v.

9 **[Defendant(s)],**

10 Defendant(s).

11 **WARNING: This is an official document from the court that affects your rights.**  
12 **Read this carefully. If you do not understand it, contact a lawyer for help.**

13 THE STATE OF [State Name] TO: **[Defendant Name]**

14 YOU ARE HEREBY SUMMONED and required to appear and defend, within the  
15 time applicable, in this action in this court. If served within [State], you must appear and  
16 defend within [number of days required under local civil procedure rules] days after the  
17 service of the Summons and Complaint upon you, [exclusive/inclusive] of the day of  
18 service. If served out of the State of [State] -- whether by direct service, by registered or  
19 certified mail, or by publication -- you shall appear and defend within [number of days  
20 required under local civil procedure rules] days after the service of the Summons and  
21 Complaint upon you is complete, [exclusive/inclusive] of the day of service.

22 YOU ARE HEREBY NOTIFIED that in case of your failure to appear and  
23 defend within the time applicable, judgment by default may be rendered against you for  
24 the relief demanded in the Complaint.

25 YOU ARE CAUTIONED that in order to appear and defend, you must file an  
26 Answer or proper response in writing with the Clerk of this Court, accompanied by the  
27 necessary filing fee, within the time required, and you are required to serve a copy of  
28 any Answer or response upon the Plaintiffs' attorney. [Local Statute Citation].

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

Requests for reasonable accommodation for persons with disabilities must be made to the division assigned to the case by the party needing accommodation or his/her counsel at least [number of days required under local civil procedure rules] judicial days in advance of a scheduled proceeding. Requests for an interpreter for persons with limited English proficiency must be made to the division assigned to the case by the party needing the interpreter and/or translator or his/her counsel at least [number of days required under local civil procedure rules] judicial days in advance of a scheduled court proceeding.

The name and address of Plaintiff's attorney is:

[Attorney Name]  
[Attorney's Address]

SIGNED AND SEALED this date: \_\_\_\_\_

CLERK OF THE COURT

By \_\_\_\_\_  
Deputy Clerk