# IMPORTANT NOTICE -- PLEASE READ CAREFULLY FAILURE TO COMPLY WITH THIS INFORMATION SUBPOENA MAY RESULT IN YOU BEING PUNISHED BY THE COURT

Name:	SUPERIOR COURT OF NEW JERSEY
Address:	LAW DIVISION, SPECIAL CIVIL PART
Telephone No.:	COUNTY
	DOCKET NO
Plaintiff, v.	CIVIL ACTION
Defendant.	INFORMATION SUBPOENA
Social Security Number (If known)	
THE STATE OF NEW JERSEY, TO:	
Judgment has been entered against in the Superior Court of New Jersey, Law Division, Spec	(the name of defendant) whose last know address is ial Civil Part,County.
	tions that the Court Rules of New Jersey require you to

answer within 14 days from the date you receive this subpoena. You must answer the questions in section \_\_\_\_\_\_A, \_\_\_\_\_B, or \_\_\_\_\_C. If you do not answer the attached questions within the time required, the judgment creditor or judgment creditor's attorney may ask the Court to conduct a hearing in order to determine if you should be held in contempt. You will be compelled to appear at the hearing and explain your reasons for your failure to answer.

You must answer each question giving complete answers, attaching additional pages if necessary. False or misleading answers may subject you to punishment by the Court. Be sure to sign and date your answers and return them to the address in the upper left hand corner within 14 days.

#### TAKE NOTICE THAT SINCE THIS IS AN OFFICIAL FORM OF THE COURTS OF THE STATE OF NEW JERSEY, YOU CANNOT REFUSE TO ANSWER ANY OF THE QUESTIONS ON THE GROUNDS THAT THE INFORMATION IS PRIVILEGED.

DATED:\_\_\_\_\_

Attorney For

Clerk

#### SECTION A TO BE ANSWERED BY BANKING INSTITUTIONS

1. Does the named defendant have any checking, savings or other accounts at your bank? Yes \_\_\_\_\_ No \_\_\_\_

2. If yes, for all such accounts set forth the type of account, the account number and the current balance in the account.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATED:\_\_\_\_\_

Signature

Print your name and title

### SECTION B TO BE ANSWERED BY EMPLOYERS

1. Does the named defendant work for your business at the present time? Yes \_\_\_\_\_ No \_\_\_\_\_

2. If yes, set forth the named defendant's gross and net weekly salary, including any overtime if applicable.

3. If the named defendant is no longer employed by your business, and if you know, state the name and address of the named defendant's current employer.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATED:\_\_\_\_\_

Signature

Print your name and title

## SECTION C TO BE ANSWERED BY THOSE CONDUCTING BUSINESS WITH THE NAMED DEFENDANT

1. Has your business ever purchased goods and/or services from the named defendant? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Does your business presently purchase goods and/or services from the named defendant? Yes \_\_\_\_\_ No\_\_\_\_

3. In the future, will your business purchase goods and/or services from the named defendant? Yes \_\_\_\_No \_\_\_\_

4. Does your business owe any money to the named defendant? YES \_\_\_\_\_ NO \_\_\_\_\_ If yes, state the amount currently owed.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATED:\_\_\_\_\_

Signature

Print your name and title