

INSTRUCTIONS FOR FLORIDA FAMILY LAW FORM 12.931(c)  
REQUEST FOR DOCUMENTS PRODUCED BY SUBPOENA

If you need copies of documents or items received by the other party in your case from another person responding to the other party's subpoena for your lawsuit, you must complete this request, file it with the court, and provide a copy of your request to the other party. The other party may charge you a reasonable cost for preparing the copies.

For further information, see Florida Rule of Civil Procedure 1.351(d).

A person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of Family Law Form 12.900, Disclosure from Nonlawyer, before they help you. Anyone helping you fill out these forms also must put their name, address, and telephone number on the bottom of the last page of every form they help you fill out.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT, IN AND  
FOR \_\_\_\_\_ COUNTY, FLORIDA

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

and

\_\_\_\_\_  
Respondent

REQUEST FOR DOCUMENTS PRODUCED BY SUBPOENA

TO: [Name of party or attorney who served subpoena]

I request legible copies of the documents produced to your in response to your subpoena without deposition upon: {name of deponent} \_\_\_\_\_. I will pay the reasonable cost of making these copies.

I CERTIFY THAT THIS REQUEST FOR DOCUMENTS PRODUCED BY SUBPOENA WAS:  
(✓ one only) \_\_\_\_\_ mailed, \_\_\_\_\_ telefaxed and mailed, or \_\_\_\_\_ hand delivered to the person(s) listed below on {date} \_\_\_\_\_, 20\_\_\_\_.

Party or their attorney (if represented)

Other

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_

Telephone No. \_\_\_\_\_

Telefax No. \_\_\_\_\_

Telefax No. \_\_\_\_\_

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

\_\_\_\_\_  
Signature of party signing certificate & pleading

Printed name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
Telephone (area code and number)

\_\_\_\_\_  
Telefax (area code and number)

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM THEY MUST FILL IN THE BLANKS  
BELOW: [✍️] fill in all blanks]

I, *{name of nonlawyer}* \_\_\_\_\_, a nonlawyer, located at  
*{street}* \_\_\_\_\_ *{city}* \_\_\_\_\_ *{state}* \_\_\_\_\_, *{phone}* \_\_\_\_\_, helped  
*{name}* \_\_\_\_\_, who is the [ one only] \_ petitioner or \_ respondent, fill out this form.