

IN THE COUNTY COURT, SEVENTH JUDICIAL CIRCUIT, IN AND FOR
ST. JOHNS COUNTY, FLORIDA

CASE NO.: _____
DIVISION: _____

Plaintiff/Petitioner/State,

v.

Defendant/Respondent.

REQUEST TO BE EXCUSED FROM E-MAIL SERVICE FOR
PARTY NOT REPRESENTED BY ATTORNEY

_____ requests to be excused pursuant to Fla. R. Gen. Prac. & Jud.
Admin. 2.516(b)(1)(D) from the requirements of e-mail service because I am not represented by
an attorney and:

I do not have an e-mail account.

I do not have regular access to the internet.

By choosing not to receive documents by e-mail service, I understand that I will receive all
copies of notices, orders, judgments, motions, pleadings, or other written communications by
delivery or mail at the following address:

I understand that I must keep the clerk's office and the opposing party or parties notified
of my current mailing address.

Pursuant to section 92.525, Florida Statutes, under penalties of perjury, I declare that I have
read the foregoing request and that the facts stated in it are true.

CERTIFICATE OF SERVICE

I certify that a copy hereof has been furnished to the clerk of court for St. Johns County
and _____ by mail delivery on _____.

Dated: _____.

Signature: _____

Printed Name: _____

Address: _____

Telephone Number: _____

E-mail address: _____

CLERK'S DETERMINATION

Based on the information provided in this request, I have determined that the applicant is excused or not excused from the e-mail service requirements of Fla. R. Gen. Prac. & Jud. Admin. 2.516(b)(1)(C).

Dated: _____ Signature of Clerk: _____

A PERSON WHO IS NOT EXCUSED MAY SEEK REVIEW BY A JUDGE BY REQUESTING A HEARING TIME.

Sign here if you want the Judge to review the clerk's determination that you are not excused from the e-mail service requirements. You do not waive or give up any right to judicial review of the clerk's determination by not signing this part of the form:

Signature: _____

Printed Name: _____

Date: _____