

IN THE COUNTY/CIRCUIT COURT OF THE FOURTH JUDICIAL  
CIRCUIT IN AND FOR DUVAL COUNTY, FLORIDA

\_\_\_\_\_  
Plaintiff/ Petitioner/State  
v.  
\_\_\_\_\_  
Defendant/ Respondent

CASE NO: \_\_\_\_\_  
DIVISION: \_\_\_\_\_

**REQUEST TO BE EXCUSED FROM E-MAIL SERVICE FOR PARTY  
NOT REPRESENTED BY ATTORNEY [FORM 2.601]**

\_\_\_\_\_ 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 has been furnished by e-mail, delivery, mail  
[choose one] on \_\_\_\_\_, to:

\_\_\_\_\_  
\_\_\_\_\_  
(insert name(s) and address(es))

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone \_\_\_\_\_ Print Name: \_\_\_\_\_

**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:

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_