

**IN THE FEDERAL MAGISTRATES COURT
OF AUSTRALIA**
REGISTRY:

File number:

.....
Applicant

.....
Respondent

.....
Other party (if applicable)

Repeat as necessary for additional parties

Notice of request to inspect in accordance with FMC Rule 15A.13(1)(c)

I (print name) certify that:

1. *(select one box only)*

I am the solicitor on record for this matter and I issued the subpoena/s in respect to this notice /or I have a letter of authorisation from the solicitor on record who issued the subpoena; or

I am a party to these proceedings and I issued the subpoena/s in respect to this notice (*for parties, photo identification is required*)

2. The following subpoenas have been issued in the FMC. *(please complete the following details for each subpoena you would like to inspect)*

Provider	Date issued	Date served	Who does it relate to?	Medical records Yes / No

3. The date for the production of the subpoena listed in point 2 above has passed.

4. All parties, the independent children’s lawyer (if appointed) and all interested persons have been served a copy of the subpoena listed in point 2 above. Details of that service are as follows:

Name of person served	Date and means of service

5. No notice of objection has been received by myself / the solicitor on record in respect to the above subpoenas.

Signed:

Date:/...../.....

OFFICE USE ONLY	
Was an objection lodged in respect of this subpoena?	YES / NO
Is this person the issuing party or the solicitor on record?	YES / NO
Did you provide the document for inspection? (If no, provide reason)	YES / NO
Name of Officer providing subpoena material (please print)	Date provided / /