STATE OF HAWAI'I CIRCUIT COURT OF THE CIRCUIT		MMONS CIVIL COMPLAINT	
CASE NUMBER			
PLAINTIFF'S NAME & ADDRESS, TEL	NO.		
PLAINTIFF	VS.	DEFENDANT(S)	
TO THE ABOVE-NAMED DEFENDANT(S)  You are hereby summoned and required to file with the court and serve upon  ,  plaintiff's attorney, whose address is stated above, an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the date of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.			
THIS SUMMONS SHALL I	NOT BE PERSONALLY DE THE GENERAL PUBLIC,	LIVERED BETWEEN 10:00 UNLESS A JUDGE OF THE , PERSONAL DELIVERY DI	ABOVE-ENTITLED
	S SUMMONS MAY RESUL' E DISOBEYING PERSON (	T IN AN ENTRY OF DEFAUI OR PARTY.	T AND DEFAULT
DATE ISSUED	CLERK	CIRCUIT COL	RT CLERK
The original document is filed in the Judiciary's electronic case management system which is accessible via eCourt Kokua at: http://www.courts.state.hi.us			
In accordance with the Americans with Disabilities Act, and other applicable state and federal laws, if you require a reasonable accommodation for a disability, please contact the ADA Coordinator at the Circuit Court Administration Office on OAHU- Phone No. 808-539-4400, TTY 808-539-4853, FAX 539-4402; MAUI- Phone No. 808-244-2929, FAX 808-244-2777;			



HAWAII- Phone No. 808-961-7424, TTY 808-961-7422, FAX 808-961-7411; KAUAI- Phone No. 808-482-2365, TTY 808-482-2533, FAX 808-482-2509, at least ten (10) working days prior to your hearing or appointment date.