

IN THE COUNTY COURT OF LAKE COUNTY, FLORIDA

CASE NO. \_\_\_\_\_

\_\_\_\_\_,  
Plaintiff,

vs.

\_\_\_\_\_,  
Defendant,

\_\_\_\_\_/

**NOTICE OF HEARING**

**(Complete with whatever the hearing is for)**

YOU ARE HEREBY NOTIFIED that the above styled matter has been set for a hearing before the Honorable Carla R. Pepperman, one of the Judges of the above-styled Court, on \_\_\_\_\_ at \_\_\_\_\_ a.m/p.m.  
*(Date of Hearing)* *(Time of Hearing)*  
or as soon thereafter as this matter may be heard.

THIS HEARING **SHALL** be held using the **ZOOM video call process** and all parties and counsel will need access to a telephone, webcam, laptop, or cellular telephone to participate in this hearing. **Please dress appropriately for this hearing, just as if you were appearing in person before the Court.** A **Zoom invitation to participate in this hearing is attached** and the parties must use the following in order to log in or join the meeting:

**ZOOM MEETING ID NUMBER:** \_\_\_\_\_

**ZOOM MEETING PASSCODE:** \_\_\_\_\_

To help facilitate this process, all parties and counsel are encouraged to review

and be familiar with the Zoom process prior to the hearing.

DATED this \_\_\_\_\_ day of \_\_\_\_\_.  
*(month, year)*

\_\_\_\_\_  
*(Signature of filer)* Plaintiff or Defendant  
*(Circle one)*

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true copy of the foregoing was furnished at least **10 days prior to the hearing** by U.S.P.S. Certified Mail Return Receipt Requested, or other means with proof of service, to: ***(please list name & address of party or parties to receive a copy below)***

\_\_\_\_\_  
\_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_.  
*(month, year)*

\_\_\_\_\_  
*(Signature of filer/person sending copies)*

**FOR CASE INFORMATION, PLEASE CALL (352) 742-4343 or 742-4145**

**NOTICE TO PERSONS WITH DISABILITIES**

**“If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the ADA coordinator at the Office of the Trial Court Administrator, P. O. Box 7800/550 West Main Street, Tavares, Florida 32778, telephone (352) 742-4221, at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.”**

**NOTICE TO PERSONS NEEDING AN INTERPRETER**

If an interpreter is needed, please place your request online with as much advance notice as possible, and no later than ten (10) days prior to the scheduled court hearing via the Fifth Circuit [website](#):

Additional information on Court Interpreting Services is located at [www.circuit5.org](http://www.circuit5.org) under the Programs & Services section.

Si necesita un intérprete, por favor solicite su pedido en línea con la mayor antelación posible, y no menos de diez (10) días antes de la audiencia programada, a través del sitio web del Quinto Circuito Judicial:  
<https://www.circuit5.org/programs-services/interpreting-services/>

Puede encontrar información adicional sobre Servicios de Interpretación Judicial en [www.circuit5.org](http://www.circuit5.org) bajo la sección Programs & Services.