IN THE STATE COURT OF EFFINGHAM COUNTY STATE OF GEORGIA

§

8
\$ \$ \$ CASE NO: \$ \$ ant. \$
ant.
HE NEED FOR A QUALIFIED INTERPRETE
and files this Notice of the Need for a Qualified y, and specifically advising the Court of the following
, will need the services of an interpreter;
roceeding for which the interpreter is required to be;
l be needed for all proceedings in the case; and
hich the interpreter is required is
e or sign language for the deaf/hard of hearing)
day of
DEFENDANT SIGNATURE PRINTED NAME:
PRO SE DEFENDANT ADDRESS:

IN THE STATE COURT OF EFFINGHAM COUNTY STATE OF GEORGIA

STATE OF GEORGIA	§ §	
vs	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
CERTIFICATE OF SERVICE		
I hereby certify that I have this day s	served a copy of the foregoing by US Mail with	
proper postage affixed thereon to assure deli	ivery to:	
Effingham 700	amin Herndon County State Court N. Pine Street Suite 240 cfield, Ga. 31329	
Dated this the day of	, 20	
	DEFENDANT SIGNATURE PRINTED NAME: PRO SE DEFENDANT ADDRESS:	
	DELETION TO THE PROPERTY OF TH	