ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		
	FOR COURT USE ONLY	
TELEPHONE NO.: FAX NO.:		
E-MAIL ADDRESS:		
ATTORNEY FOR (Name):		
NAME OF COURT:		
STREET ADDRESS:		
MAILING ADDRESS: CITY AND ZIP CODE:		
BRANCH NAME:		
PLAINTIFF/ PETITIONER:	-	
DEFENDANT/ RESPONDENT:		
CIVIL SUBPOENA (DUCES TECUM) for Personal Appearance and	CASE NUMBER:	
Production of Documents, Electronically Stored Information, and Things a Trial or Hearing and DECLARATION	t	
THE PEOPLE OF THE STATE OF CALIFORNIA, TO (name, address, and telephone number of witness, if known):		
1 VOLLAGE ORDEDED TO ARREAD AS A WITNESS in this potion at the data time	and place chown in the box below	
 YOU ARE ORDERED TO APPEAR AS A WITNESS in this action at the date, time UNLESS your appearance is excused as indicated in box 3b below or you make 		
item 4 below.	an agreement with the person named in	
a. Date: Time: Dept.:	Div.: Room:	
b. Address:	<u> </u>	
EMPLOYEE AFFECTED MUST BE OBTAINED BEFORE YOU ARE REQUIRED TO RECORDS.	PRODUCE CONSUMER OR EMPLOYEE	
 RECORDS. 3. YOU ARE (item a or b must be checked): a. Ordered to appear in person and to produce the records described in the de declaration or affidavit. The personal attendance of the custodian or other quoriginal records are required by this subpoena. The procedure authorized by 1562 will not be deemed sufficient compliance with this subpoena. b. Not required to appear in person if you produce (i) the records described in the declaration or affidavit and (ii) a completed declaration of custodian of record 1560, 1561, 1562, and 1271. (1) Place a copy of the records in an envelope declaration of the custodian with the records. Seal the envelope. (2) Attach a write on the envelope the case name and number; your name; and the date, (3) Place this first envelope in an outer envelope, seal it, and mail it to the classical complexity. 4. IF YOU HAVE ANY QUESTIONS ABOUT THE TIME OR DATE YOU ARE TO APPET THAT YOUR PRESENCE IS REQUIRED, CONTACT THE FOLLOWING PERSON BETO APPEAR: 	claration on page two or the attached alified witness and the production of the Evidence Code sections 1560(b), 1561, and the declaration on page two or the attached as in compliance with Evidence Code sections (or other wrapper). Enclose the original copy of this subpoena to the envelope or time, and place from item 1 in the box above. Each of the court at the address in item 1. this form. AR, OR IF YOU WANT TO BE CERTAIN EFORE THE DATE ON WHICH YOU ARE	
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Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the date on which you are to appear. Contact the clerk's office or go to www.courts.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Response (form MC-410). (Civil Code, § 54.8.)



(Proof of service on page 3)

	SUBP-002
PLAINTIFF/PETITIONER:	CASE NUMBER:
DEFENDANT/RESPONDENT:	
PROOF OF SERVICE OF CIVIL SUBPOENA (DUCES T Documents, Electronically Stored Information, and	
 I served this Civil Subpoena (Duces Tecum) for Personal Appeara Information, and Things at Trial or Hearing and Declaration by per a. Person served (name): b. Address where served: 	-
c. Date of delivery: d. Time of delivery: e. Witness fees (check one): (1) were offered or demanded and paid. Amount: \$	
3. Person serving: a. Not a registered California process server. b. California sheriff or marshal. c. Registered California process server. d. Employee or independent contractor of a registered Cal e. Exempt from registration under Business and Profession f. Registered professional photocopier. g. Exempt from registration under Business and Profession h. Name, address, telephone number, and, if applicable, county of	ns Code section 22350(b). ns Code section 22451.
declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date:	(For California sheriff or marshal use only) I certify that the foregoing is true and correct. Date:

(SIGNATURE)

(SIGNATURE)