**IN THE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Justice Court, Justice Court of Record, Municipal Court, City Court, City Court of Record),*

 **COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, STATE OF MONTANA**

 *(County)*

|  |  |
| --- | --- |
| [ ]  Plaintiff Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **- OR -**[ ]  State of Montana vs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,  Defendant(s). | Case No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SUBPOENA TO APPEAR AND** **TESTIFY AT A HEARING OR**  **TRIAL AND/OR PRODUCE** **DOCUMENTS AND ITEMS** |

TO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(name and address of person to whom this subpoena is directed)*

**YOU ARE REQUIRED** to appear in the court at the time, date, and place set forth below to testify at a hearing or trial in this case. When you arrive, you must remain at the court until the judge or a court officer allows you to leave.

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(address and location of courtroom)*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(date of hearing or trial)* *(time that witness must appear)*

**YOU MUST BRING** with you the following documents, electronically stored information, or objects *(leave blank if not applicable)*:

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

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

Issued on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(date)* Judge or Clerk

**\* \* \* Failure to comply with this Subpoena is punishable by Contempt of Court \* \* \***

The party or attorney requesting this subpoena is:

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

 *(name, address, and telephone number of person requesting subpoena)*

**ADDITIONAL NOTICES**

1. **The party requesting this Subpoena must arrange to have it served.**
2. **If you are served this Subpoena, you may demand advance payment of a $10 witness fee plus payment for each mile of travel to attend and return from the court. Refer to Section 2-18-503, M.C.A. to calculate mileage. The party requiring your attendance is responsible for payment.**

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

**PROOF OF SERVICE**

*(to be completed by person who serves the Subpoena)*

[ ]  I am a Sheriff, Deputy, Officer, or Registered Process Server, and my name and title are written below; **- OR -**

[ ]  I am 18 years of age or older and not a party to this case, and my name, address, and telephone number are written below.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

*(name and title of officer, or name and contact information of person making service)*

received this Subpoena on \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, and I served the Subpoena by

delivering a copy to the named person as follows:

Date of service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; and Place of service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; **-- OR --**

I am returning this Subpoena unserved because: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Service Fee: $\_\_\_\_\_\_\_\_\_\_\_ plus Mileage $\_\_\_\_\_\_\_\_\_\_\_ for a Total: $\_\_\_\_\_\_\_\_\_\_\_\_

I declare under penalty of perjury and under the laws of the state of Montana that the foregoing is true and correct.

Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_