



DWIGHT D. SULLIVAN
COUNTY CLERK GALVESTON COUNTY

APPLICATION FOR SUBPOENA DUCES TECUM

VS

Date:
Cause Number:
County Court at Law Number:
Of Galveston County
Date of Incident:

THIS APPLICATION IS FOR THE ISSUANCE OF SUBPOENA TO BE ISSUED TO THE PERSON(S) LISTED BELOW. THE TESTIMONY OF THIS/THESE PERSON(S) IS/ARE BELIEVED TO BE MATERIAL IN THE CASE ON TRIAL ON BEHALF OF:
[] PLAINTIFF [] DEFENDANT [] STATE OF TEXAS [] OTHER:

Please contact upon receipt:
Name: Phone Number:
Email Address:

WITNESS TO BE SUBPOENAED:
Name:
Address where witness may be found:
City: State: Zip:
Vocation (if known):

DATE RETURNABLE OR TO APPEAR:
ON THE DAY OF ,20 AT O'clock A.M./P.M.

SAID ABOVE NAMED WITNESS IS FURTHER COMMANDED to produce said time and place above set forth the following books, papers, documents, or other tangible things to wit:

Additional information:

Issued at the request of:
Name: Texas Bar No.:
Address: Telephone:
Email Address: