DR 4866 (07/14/26)
COLORADO DEPARTMENT OF REVENUE
Hearings Division
PO Box 17087
Denver CO 80217-0087
Phone (303) 205-5606
dor_regulatoryhearings@state.co.us

Subpoena to Testify Request Cover Sheet for Regulatory Hearings

Respondent Last Name | Respondent First Name | Middle Initial

Case Number

Requestor Last Name | Requestor First Name | Middle Initial

Requestor Phone Number

Preferred Return Method: ◯ Email ◯ Mail

Email Address

Mailing Address

City | State | ZIP Code

Name of Individual to be Subpoenaed

Expected Testimony

Email to: dor_regulatoryhearings@state.co.us

Subpoena to Testify

In the matter of:

Respondent

Case Number

Type Name of Individual to be Subpoenaed here

You are hereby directed to appear

☐ by Zoom at a hearing before the Colorado Department of Revenue, Hearings Division:

Zoom Meeting ID (Required):

Zoom Hearing URL (Required):

Zoom Dial In Number (Required):

On Date:

Time:

You Must Take the Following Action:

By Telephone:

Call the Zoom Dial In Number. Enter your Zoom Meeting ID number, then press the number (pound) key. When prompted to enter your host number or press pound, press the number (pound) key. The system will advise you that you are checked in, and will be unmuted when all participants are ready. Please stay on the line.

By Computer or App:

Go to the Zoom Meeting URL Address. You will be prompted to download and run Zoom. Click on the file and install the the launcher. We recommend completing this step well before your meeting time. Your computer must have a microphone & speaker. If the host hasn't started the meeting, you will see a message stating "Please wait for the host to start this meeting." Once the host joins, the Zoom meeting window will appear where you can join by audio and video. Select Join Audio Conference by Computer.

Subpoena to Testify (Continued)

Name and signature of person requesting the subpoena:

Requestor name

Party (if not the same as requestor)

Requestor phone number

Requestor email address

Signature (Requestor)

Date (MM/DD/YY)

Granted by (Hearing Officer)

Date Granted (MM/DD/YY)

Service of a subpoena for testimony in a hearing shall be made no later than 48 hours before the time for appearance set out in the subpoena. C.R.C.P. Rule 45(2)(b)(1)(A)

Affidavit of Service

Respondent

Case Number

The Affiant

being duly sworn, says: That he/she is over the age of eighteen years and is not a party to this action and that Affiant has personally served this within subpoena in the

City of

County of ,

State of Colorado by handing a copy of same to

(Name of Person)

(Title of Person)

who has been identified as

on (date) , at a.m./p.m., and paid the witness fee(s) as follows:

Witness Fee..... $ (If applicable pursuant to §24-4-105(5) C.R.S.)

Mileage Fee..... $ (If applicable pursuant to §13-33-103 C.R.S.)

Total..... $

Subscribed and affirmed, or sworn to before me in the

County of

State of

this day of , 20

Notary Signature

Commission Expiration Date

Affiant