

Subpoena Duces Tecum Request Cover Sheet

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

Email to: dor_info_hearings@state.co.us

Subpoena Duces Tecum

In the matter of the driving privilege of:

Respondent

Date of Birth (DOB)

Case Number

Date of Offense

Custodian of Records

Street Address

City

State ZIP Code

For a hearing to be held by Zoom at a hearing before the Colorado Department of Revenue, Hearings Division:

Zoom Hearing URL:

On Date:

Time:

You Must Take the Following Action:

Produce the requested documents, data, or other objects to both the requestor at the email address or mailing address above, and the Hearings Division at dor_info_hearings@state.co.us

The deadline is one day prior to the scheduled hearing as listed above. Requested item(s) are as follows:

Please sign the subpoena and complete the required statement attachment.

Name and Signature of individual requesting the Subpoena:

Name

Signature

Granted by: (Hearing Officer)

Today's Date (MM/DD/YY)

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