

SUBPOENA REQUEST FORM

SUBPOENA NUMBER: _____

Inspector General Investigation Number: _____

Requesting Officer/Agency: _____

Address: 3400 Martin Luther King Ave. City/State/Zip: Oklahoma City OK, 73136

I understand that by making this *Subpoena Request* that all information obtained by my agency in compliance with this subpoena may only be used for the enforcement of the criminal laws of this State, and any public disclosure of such information for any other purpose may be punished as a contempt of court, 22 O.S. 2001, § 355. Failure by any person without adequate excuse to obey a subpoena served upon him or her may be deemed in contempt by the District Court in which the person who is subpoenaed resides. The Office of the General Counsel of the Oklahoma Department of Corrections may file appropriate action in the District Court in which the person who is subpoenaed resides.

INFORMATION FOR ISSUANCE OF SUBPOENA

Name: _____
Name of person to be subpoenaed together with entity represented (if relevant)

Address: _____ City/State/Zip: _____

Telephone: _____ Fax: _____

Type of Subpoena to issue: Witness to give testimony _____
Witness to provide business records _____
Witness to provide other object(s) _____

Time period to request for business records: From: _____ To: _____
(MM/DD/YEAR) (MM/DD/YEAR)

Description of records or object(s) to be produced:

To be completed by General Counsel staff:

Subpoena Request Received: _____

Subpoena Appear Date: _____

To be served by: Requesting Agency _____
Another Agency _____
Certified R.R. Mail _____
Fax _____

Date Subpoena Referred for Service: _____

Date of Subpoena Return: _____