



IN THE _____ JUDICIAL CIRCUIT COURT, _____, MISSOURI

Judge or Division:	Case Number:	
Plaintiff/Petitioner: vs. Defendant/Respondent:	Person Subpoenaed:	Plaintiff's/Petitioner's Attorney:
	Address:	Address:
	Telephone:	Telephone:
	Requesting Party: <input type="checkbox"/> Plt./Pet. Atty <input type="checkbox"/> Plt./Pet. <input type="checkbox"/> Def/Resp. Atty <input type="checkbox"/> Def./Resp.	Defendant's/Respondent's Attorney:
	Address: (Of Party Checked Above)	Address:
	Telephone:	Telephone:

(Date File Stamp)

Subpoena Order to Appear/Produce Documents/Give Depositions

The State of Missouri to: _____ (person subpoenaed)

You are commanded:

to contact _____ (name) at _____ (telephone) who will advise of time and place appearance is required.

to appear at _____ on _____ (date), at _____ (time).

to testify on behalf of: _____

to give depositions.

to bring the following _____

(Seal)
(Attach additional sheet if necessary)

_____ Date Issued
_____ Clerk

Return/Affidavit

I certify that I served this subpoena in _____ (County/City of St. Louis), Missouri, by:

delivering a copy to the person subpoenaed _____ (date).

reading a copy to the person subpoenaed on _____ (date).

I tendered legal fees for travel expenses per Section 491.130 RSMo in the amount of \$ _____.

Sheriff's Fees (if applicable)

Summons	\$ _____
Non Est	\$ _____
Sheriff's Deputy Salary	\$ _____
Supplemental Surcharge	\$ 10.00 _____
Mileage	\$ _____ (_____ miles @ \$ _____ per mile)
Total	\$ _____

_____ Person Serving Subpoena

Instructions

1. This subpoena will remain in effect until this trial is concluded or you are discharged by the Court. You must attend trial from time to time as directed. **No additional Subpoena is required for your future appearance at any trial of this case.** If you fail to appear, you may be held in contempt of court.
2. If you have any questions regarding this subpoena, contact the person who requested it listed on the front.
3. **Bring this form with you to court.** This form must be completed, signed, and returned to the clerk as soon as you have testified or been dismissed.

Witness Claim

I have served _____ day(s) as a witness and I traveled _____ mile(s) round-trip from my home to the courthouse to attend this proceeding.

Signature

Current Address

City, State, Zip

Subscribed and sworn to before me on _____ (date).

Total Claimed \$ _____

Clerk