

**SUBPOENA FOR DEPOSITION
AND SUBPOENA DUCES TECUM**

_____ * **DOCKET NO.** _____ **DISTRICT** _____
VERSUS * **OFFICE OF WORKERS' COMPENSATION**
_____ * **STATE OF LOUISIANA**
TO _____

YOU ARE HEREBY COMMANDED to appear at the office of _____
_____ address _____

_____ Telephone # _____ at _____ o'clock _____

_____.m. on the _____ day of _____, 20____, to have your oral testimony taken in the
above entitled and numbered cause.

YOU ARE/ARE NOT (circle one) FURTHER COMMANDED to produce at the above time
and place the following:

This **SUBPOENA** was issued by the Office of Workers' Compensation on the _____ day of
_____, 20_____.

BRENDA WILLIAMS
Office of Workers' Compensation

This **SUBPOENA** was ordered by Attorney:

I hereby certify I have served a copy of
this subpoena on all attorneys of record.

Telephone: (____) _____

SUBPOENA DUCES TECUM FOR INSPECTION

VERSUS

* DOCKET NO. _____ DISTRICT _____
* OFFICE OF WORKERS' COMPENSATION
* STATE OF LOUISIANA

TO _____

YOU ARE HEREBY COMMANDED to produce (or mail/deliver) at the office of _____

address _____

_____ Telephone # _____ at (by) _____ o'clock _____.m.
on

the _____ day of _____, 20____, the following documents:

This **SUBPOENA** was issued by the Office of Workers' Compensation on the _____ day of _____, 20____.

BRENDA WILLIAMS
Office of Workers' Compensation

This **SUBPOENA** was ordered by Attorney:

I hereby certify I have served a copy of
this subpoena on all attorneys of record.

Telephone: (____) _____

SUBPOENA AND SUBPOENA DUCES TECUM

_____ * **DOCKET NO.** _____ **DISTRICT** _____
VERSUS * **OFFICE OF WORKERS' COMPENSATION**
_____ * **STATE OF LOUISIANA**

TO _____

YOU ARE HEREBY COMMANDED to appear before the Workers' Compensation Court at

_____ Telephone # _____ at _____ o'clock
_____.m. on the _____ day of _____, 20____, or on any other day that this matter may be

continued to give testimony in the above entitled and numbered cause. **You must remain in Court until discharged by the Judge. You must testify to the truth, to the best of your knowledge in this case.**

YOU ARE/ARE NOT (circle one) FURTHER COMMANDED to produce at the above time and place the following:

FAILURE TO APPEAR OR PRODUCE AS DIRECTED ABOVE SHALL SUBJECT YOU TO ANY PENALTY AS PRESCRIBED BY LAW.

This **SUBPOENA** was issued by the Office of Workers' Compensation on the _____ day of _____, 20____.

BRENDA WILLIAMS
Office of Workers' Compensation

This **SUBPOENA** was ordered by Attorney:

I hereby certify I have served a copy of this subpoena on all attorneys of record.

Telephone: (____) _____