TO:		Date:	,20
Administrat	tive Law Judge		
	of Administrative Hearings , Texas		
certain witn	, I requess to attend and give testimony [and elevant and material to the administra	nd bring certain eviden	tiary documents and/or items]
(1)	Address:		
(2)	Docket No		
(3)	Scheduled Hearing date/time:	,20 at	□ AM □ PM
(4)	Hearing Type: □ Telephonically □	by videoconference \square in	n person, TX
(5)	Address:		
	Telephone No.:()_		
(6)	Requested Witness:		
(7)	Travel Miles (Round-trip):		
(8)	Description of Items to be Produced		
(9)	State good cause why testimony or i	tems are relevant and ne	cessary:
	ify that a copy of this request was deli ,20		

Requestor

Received by SOAH:

STATE OFFICE OF ADMINISTRATIVE HEARINGS



Driver's License (ALR) Subpoena

Subpoena

Zip

Texas Department of Public Safety

V.

	V ·	§ § §	SOAH Docket Number:				
THE STATE (OF TEXAS						
TO: Any Sheriff; Constable; or Person not less than 18 years old and not a party:							
YOU ARE CO	MMANDED to serve this	s subpoena by deliv	ery to the following person:				
Witness:							
Address:							

State

City:

Subpoena **Texas Department of Public Safety** § § **SOAH Docket Number:** \mathbf{V} . § § **GREETINGS, YOU ARE COMMANDED** to attend and give testimony in the above named proceeding. This matter is set for hearing on ,20 at ☐ AM ☐ PM The hearing will be conducted \square Telephonically \square by Zoom videoconference \square in person. Physical Address or Teleconference/Videoconference Instructions Room/Venue: **SOAH Office Contact Number:** YOU ARE COMMANDED TO BRING with you the following document(s) and object(s) related to Defendant's arrest if they are in your possession, custody, or control: ☐ Probable cause affidavit ☐ None DIC 23 ☐ Video or digital recording ☐ DIC 24 ☐ Any other report you prepared ☐ Offense Report: (include number if known) Subpoena issued on the request of: (Name, address, & phone) This subpoens shall remain in effect until you are relieved by the Administrative Law Judge. Witness fees will be paid to you upon your appearance. Failure without adequate excuse to obey this subpoena may be deemed a contempt of court and may subject you to administrative sanctions or judicial enforcement by the district court in the county in which the subpoena is served, and may be punishable by fine or confinement or both. Date Signature If you have questions regarding this subpoena, contact the nearest Department of Public Safety office at: Amarillo 806.468.1419 Houston 713.219.4170 Austin Lubbock 512.424.5193 806.472.2819 Bryan 979.776.3148 McAllen 956.565.7130 Corpus Christi Midland 210.804.5700 432.498.2195 El Paso San Antonio 915.834.7628 210.804.5700 Fort Worth 817.882.8263 Tyler 903.939.6016 Garland 214.861.2020 Waco 254.759.7172 HRG Form 7506

Revised 11/2020

RETURN TO STATE OFFICE OF ADMINISTRATIVE HEARINGS

Information in this section is required				
Defendant Name:				
SOAH Docket Number:				
Date and Time of Hearing:		20 at _		AM □ PM
Officer/Witness Name:				
CERTII	FICATE OF SEI	RVICE		
I executed this subpoena by delivering acopy	y to			
at				
on Month Day20	at \square	АМ □ РМ		
Any and all fees and costs incurred for service for payment	e of this subpoer	ia were subm	itted to the red	questing party
for payment. I declare the foregoing is true and correct:				
r declare the foregoing is true and correct.				
Printed Name	 Signa	ture of Perso	n Serving Subr	ooena
	O		0 1	
Date				
Address	City		State	Zip
Copies to: (1) Texas Department of Public (2) Defendant Attorney	Safety			
(2) Defendant Attorney				
ACCEP	TANCE OF SE	RVICE		
I, the undersigned witness named in this Sul this Subpoena. I further understand my lega				epted service o
uno suspectiai i furtifor universitatia my regu	i obligation to up	pour ut the h		
WITNESS SIGNATURE			Date	
ALTERNATIVE	ACCEPTANCI	E OF SERVI	CE	
I acknowledge that I received and accepted a pursuant to agency policy.	service of this sul	ppoena on be	half of the req	uested witness,
SIGNATURE OF PERSON ACCEPTING SER	RVICE		Date	