

BEFORE THE WORKERS' COMPENSATION COURT OF EXISTING CLAIMS

In Re Claim Of:

Claimant
Respondent
Insurance Carrier, Own Risk Group or Individual Self-Insured
Court Claim Number:
Social Security Number:
Date of Injury:

SUBPOENA

TO: GREETINGS:

You are hereby commanded to appear before the Workers' Compensation Court at
State of Oklahoma, on the day of
at M., and bring with you
to testify as a witness in a certain cause pending before the Workers' Compensation Court, wherein
is Claimant,
is Respondent,
and
is Insurance Carrier, on behalf of the
and not depart without leave of the Workers' Compensation Court.

FAILURE TO OBEY THIS SUBPOENA MAY BE PUNISHABLE AS PROVIDED FOR BY LAW

Workers' Compensation Court Judge, or Court Clerk, Workers' Compensation Court, or Attorney Issuing Subpoena

STATE OF OKLAHOMA
County of

RETURN OF SERVICE

Received this writ this day of
at o'clock, M., on the
day of
and served the same by delivering a copy thereof with all the endorsements thereon duly certified to the within named at
County at o'clock M., on the day of

FEES FOR SERVICE

Serving subpoena, first person. \$
Additional persons. \$
Mileage. Miles. \$
Total. \$

Dated:

06/00