

Completing the Praecipe (Request) for a Subpoena

Use this form to ask the court to issue a subpoena for a person to appear as a witness at a scheduled trial, or to bring documents or other items to that trial.

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Choose the court and the county using the drop-down lists.

Enter the name of the plaintiff.

Enter the name of the defendant.

Enter the type of court in the county

Enter the name(s) and addresses of the people you are requesting a subpoena be sent to.

If you are asking for the witness(es) to bring documents or other items, check the box and give a description.

Enter the case number.

Check the box for what your role is in this case.

Enter the date, time, and the place the matter is currently scheduled for.

Read this statement carefully and follow the directions

IN THE _____ COURT OF _____ COUNTY, NEBRASKA
Choose the court Choose the court

Case No. _____

Plaintiff

vs.

Defendant

PRAECIPE FOR SUBPOENA

To the Clerk of the _____ Court in _____ County, Nebraska:

Please issue subpoena for service on the following named individual(s) to appear and give testimony on behalf of the (plaintiff defendant).

Date: _____ Time: _____ o'clock (am pm).

Place: _____

NAME:	** ADDRESS:
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

** Witness(es) employed by the State of Nebraska or a political subdivision or who are privately-employed security guard(s) pursuant to Neb. Rev. Stat. § 25-1223(6) are designated by checking the box after the witness's name.

The witness(es) shall be directed to bring the following documents or tangible items:

Choose how you would like the witness served (given the Subpoena).

If completed by an attorney, enter your Bar Number.

Please direct that the subpoena be served as follows:

- By the Sheriff of _____ County, Nebraska.
- By Constable of _____ County, Nebraska.
- By: _____, who pursuant to Neb. Rev. Stat. § 25-1223(9) is a person 21 years of age or older and NOT a party to the action or proceeding.
- By certified mail, return receipt requested.

Signature: _____ Date: _____

Printed Name: _____

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney:
Bar Number: _____

Sign and date the form. Enter your printed name, your address, telephone number, and your email address.