CAUSE NO._____

OFFENSE/CHARGE:

SUBPOENA DUCES TECUM

TO ANY PEACE OFFICER OF THE STATE OF TEXAS OR ANY AUTHORIZED PERSON:

You are commanded to summon:

Custodian of Records Texas State Board of Pharmacy, Prescription Monitoring Program 1801 Congress Avenue, Suite 13.100, Austin, Travis County, Texas 78701 Telephone: 512-305-8000

To appear before the _	Court in	County, Texas, located at				
	on the following date and time	then and there to testify as a witness in				
behalf of the State in a CRIMINAL ACTION pending before said court and there attend until lawfully discharged.						
Delivering a copy of the requested documents to the officer serving this subpoena will be sufficient compliance						
with the subpoena.						

Said above named witness is further commanded to produce at said time and place above the following:

Prescription Monitoring Program Patient Prescription History Report for:

Name:	 	
Data of Pirth:		

Date of Birth.	

During the time period of: _____ through: _____

This information is sought for the administration, investigation, or enforcement of Chapter 481 of the Texas Health and Safety Code or another law governing illicit drugs in this state or another state.

DO NOT FAIL to return this writ to said Court, with return thereon, showing the manner of execution.

Failure to comply with the commands of the subpoena may subject you to penalty for contempt of court.

Issued this the _____ day of _____, 2022.

Issued at request of:	By:	
Name:		, District Clerk
Phone Number:	. <u> </u>	
Address:	_	
Email:		