

IN THE _____ COURT OF _____ COUNTY
STATE OF _____

Petitioner/Plaintiff,)
)
)
Vs.) NO. _____
)
)

Respondent/Defendant)
)

**NOTICE OF INTENT
TO SERVE SUBPOENA ON NON-PARTY**

Take notice that upon the expiration of _____ () days from the date of service of this Notice, Defendant, _____, Inc. Inc., will apply to the Clerk of this Court for the issuance of the attached subpoena directed to the _____ Medical Center, who is not a party and whose address is _____, _____, to produce copies of the following documents:

"Any and all medical records, correspondence, notes, memoranda, reports, x-rays or other documents, including an itemized statements of charges, which relate to the treatment and medical condition of _____, who resides at _____, _____; Social Security Number _____, injured on the _____ day of _____, 20____."

Respectfully submitted,

Dated: _____

Name:

Title:

Address:

Address:

City, State, Zip:

Phone:

Fax:

E-Mail:

Attorney No.:

CERTIFICATE OF SERVICE

I, _____, do hereby certify that I have this day mailed,
U.S. Mail, postage prepaid, a true and correct copy of the above and foregoing to
_____, at the following address;

THIS the ____ day of _____, 20____.
