



SUBPOENA DUCES TECUM

Decedent's Name: _____

Coroner Case No: _____

Greetings To: The Custodian of Records or Other Qualified Person at
Business/Organization/Name _____
Address _____
Telephone No. _____

YOU ARE ORDERED, pursuant to NRS 259.050, to produce and permit inspection and copying of documents, records or materials related to the Coroner's investigation in the death of the above-stated decedent that are in your possession, custody, or control. Specifically, the items to be produced are as follows:

A true, legible, and durable copy shall be delivered to the Coroner's representative, personally, by email, facsimile or United States mail or similar delivery service, no later than (*insert date production is due*)__
_____*NA*_____, at the following address: 1704 Pinto Lane, Las Vegas, NV 89106.

All documents shall be produced as they are kept in the usual course of business or shall be organized and labeled to correspond with the categories listed.

YOU ARE FURTHER ORDERED to authenticate the records produced, pursuant to NRS 52.260, and to provide with your production a completed Certificate of Custodian of Records in substantially the form attached as Exhibit "A."

Melanie Rouse, Coroner

Signature

Date: _____

CERTIFICATE OF DELIVERY OF SUBPOENA DUCES TECUM

I HEREBY CERTIFY that on _____, 20____, I

- Personally delivered the SUBPOENA DUCES TECUM to _____
_____.
- Emailed the SUBPOENA DUCES TECUM to _____ at
the email address of _____.
- Delivered by facsimile the SUBPOENA DUCES TECUM to
_____ at the facsimile number of _____.
- Placed a true and correct copy of the foregoing SUBPOENA DUCES TECUM in the United
States Mail, with first-class postage prepaid, addressed to the following:

(Signature)_____

(Print name)_____

On _____, at _____ a.m./p.m. I followed up with _____ and
ensured that the SUBPOENA DUCES TECUM was received by _____.

(Signature)_____

(Print name)_____

EXHIBIT "A"

CERTIFICATE OF CUSTODIAN OR RECORDS

In the matter of _____.

NOW COMES _____ (*name of custodian*), who after first being duly sworn and deposes and says:

1. That the deponent is the _____ (*position or title*) of _____ (*name of employer*) and in his or her capacity as _____ (*position or title*) is a custodian of the records of _____ (*name of employer*).
2. That _____ (*name of employer*) is licensed to do business as a _____ in the State of _____.
3. That on the ____ day of the month of _____ of the year _____, the deponent was served with a subpoena in connection with the above-entitled cause, calling for the production of records pertaining to _____

_____.
4. That the deponent has examined the original of those records and has made or caused to be made a true and exact copy of them and that the reproduction of them attached hereto is true and complete.
5. That the original of those records was made at or near the time of the act, event, condition, opinion or diagnosis recited therein by or from information transmitted by a person with knowledge, in the court or a regularly conducted activity of the deponent or _____ (*name of employer*).

Executed on: _____ (*signature*) _____

SUBSCRIBED AND SWORN to before me this
____ day of _____, 20____.

NOTARY PUBLIC in and for the County of _____, State of _____.