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Deposition Order Form

Cause Number: _____ Court Number: _____

_____ VS. _____

Date of Deposition: _____ Time of Deposition: _____

Location of Deposition: _____

Name of Requesting Attorney: _____

Contact Person: _____

Telephone Number: _____

Witness(es): _____

By Notice: _____ Yes _____ No

By Video:
Provided by Us _____ Yes _____ No

By Subpoena: _____ Yes _____ No

Are we to prepare and serve a subpoena? _____ Yes _____ No

If YES, please write any information we may need:

Email Address: _____