

# SUBPOENA FOR WITNESSES

Commonwealth of Virginia

VA. CODE §§ 8.01-407, 16.1-265, 17.1-617, 19.2-267,  
and Rules 3A:12 and 7A:12

General District Court ( Civil  Criminal  Traffic)  
 Juvenile and Domestic Relations District Court

.....  
CITY OR COUNTY

.....  
STREET ADDRESS OF COURT TELEPHONE NUMBER

### TO ANY AUTHORIZED OFFICER:

You are hereby commanded to summon forthwith the witnesses listed below to appear on

..... at ..... to testify in this case.  
DATE TIME

RETURNS: Each witness was served as indicated below, according to law (unless not found).

NAME .....	
ADDRESS.....	
<input type="checkbox"/> PERSONAL SERVICE	Tel. No. ....
<input type="checkbox"/> Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to a person found in charge of usual place of business or employment during business hours and giving information of its purport. <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.  <input type="checkbox"/> Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> Served on Secretary of the Commonwealth.	
<input type="checkbox"/> NOT FOUND	..... SERVING OFFICER
.....	for .....
DATE	

NAME .....	
ADDRESS.....	
<input type="checkbox"/> PERSONAL SERVICE	Tel. No. ....
<input type="checkbox"/> Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to a person found in charge of usual place of business or employment during business hours and giving information of its purport. <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.  <input type="checkbox"/> Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> Served on Secretary of the Commonwealth.	
<input type="checkbox"/> NOT FOUND	..... SERVING OFFICER
.....	for .....
DATE	

**NOTICE TO WITNESS:** Failure to comply with this subpoena could cause you to be fined or jailed for contempt of court. Bring this subpoena with you to court. When asking about this case, have this form in hand.

RETURN DATE	CASE NO.
<input type="checkbox"/> Commonwealth of Virginia [or] <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> TOWN of  ..... [or]  <input type="checkbox"/> .....  <p style="text-align:center;"><i>In re/v.</i></p> Charge:  <hr/> <hr/> <p style="text-align:center;"><b>SUBPOENA FOR WITNESSES</b></p> <hr/> <hr/> The witnesses are subpoenaed to testify on behalf of:  <input type="checkbox"/> Commonwealth of Virginia [or] <input type="checkbox"/> the City, County or Town indicated [or] <input type="checkbox"/> Plaintiffs [or] <input type="checkbox"/> Defendants [or] <input type="checkbox"/> Juvenile  Subpoena requested by:  .....  DATE ISSUED  <hr/> <input type="checkbox"/> CLERK <input type="checkbox"/> MAGISTRATE <input type="checkbox"/> JUDGE <input type="checkbox"/> PROSECUTING <input type="checkbox"/> DEFENSE ATTORNEY	

**IF YOU ARE THE VICTIM OF A CRIME**, defined by the Code of Virginia as anyone suffering physical, psychological or economic harm as a direct result of a (1) **felony** or (2) **assault and battery, stalking, sexual battery, attempted sexual battery, driving while intoxicated, violation of a protective order, or a delinquent act of one of these offenses that would be a felony or misdemeanor if committed by an adult, you may be entitled to certain information or assistance.**

**Contact your local Commonwealth's Attorney's office or Victim-Witness Assistance program for further information.**

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### **VICTIMS AND WITNESSES**

MAY BE ENTITLED TO THE FOLLOWING SERVICES IN CASES INVOLVING THE CRIMES NAMED ABOVE:

- **PROTECTION** from harm or threats arising from cooperation with law enforcement or prosecution efforts through witness protection programs administered by state, federal or local police. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.
- **SEPARATE** waiting areas during court, where available, that afford privacy and protection from intimidation and that does not place the victim in close proximity to the defendant or the defendant's family. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.
- **FINANCIAL ASSISTANCE** by filing a claim for Crime Victim's Compensation, restitution for damages or loss, or assistance in having promptly returned any property held by law enforcement agencies for evidence. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.
- **EMPLOYER INTERCESSION SERVICES** to minimize loss of pay and other benefits resulting from court appearances, and ensuring that you are not penalized for appearing in court. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.
- **NOTICES** from (1) the Commonwealth's Attorney of court proceedings, changes in court dates, case status and dispositional information (2) the Attorney General of the filing and disposition of any appeal or habeas corpus proceeding in the case, if requested, and (3) a local jail or penitentiary of the convicted assailant's release or escape, upon your written request. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.
- **COURTROOM ASSISTANCE** through the services of an interpreter, confidentiality of your address, telephone number and place of employment, upon your written request. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.
- **VICTIM INPUT** by the preparation of a written victim impact statement after the defendant's conviction and the ability to remain in the courtroom during court proceedings unless you are excluded as a material witness. Upon a written request by the victim, the Commonwealth's Attorney shall consult the victim in a felony case either verbally or in writing to inform the victim of the contents of a proposed plea agreement and to obtain the victim's views, about the disposition of the case, including the victim's views concerning dismissal, pleas, plea negotiations and sentencing. Contact your local Commonwealth's Attorney or Victim-Witness Assistance program for further information.

**DISABILITY ACCOMMODATIONS** for losses of hearing, vision, mobility, etc. Contact the court ahead of time.