

ORIGINAL

(To be executed and served upon
the individual named below)

**BOARD OF TRUSTEES OF THE POLICE PENSION FUND
OF THE CITY OF DES PLAINES, ILLINOIS**

IN RE:

)
)
) NO.
)
)

SUBPOENA/SUBPOENA DUCES TECUM

TO:

GREETINGS:

You are hereby commanded to appear before the Board of Trustees of
the Police Pension Fund of the City of Des Plaines, Illinois, in the above captioned proceeding
on _____, _____, at _____ a.m., at City Hall, Room _____,
1420 Miner Street, Des Plaines Illinois 60016, pursuant to the Pension Code of Illinois.

*You are also commanded to bring with you _____

WITNESS, _____, President of this Board, whose signature is
affixed hereto on _____.

President

(Seal) (* only if applicable)
City of Des Plaines Pension Fund
1420 Miner Street
Des Plaines, Illinois 60016
(847) 827-4804

FORM 1

DUPLICATE

(To be executed in full
and returned to the Board)

**BOARD OF TRUSTEES OF THE POLICE PENSION FUND OF THE
CITY OF DES PLAINES, ILLINOIS**

IN RE:

)
)
) NO.
)

SUBPOENA/SUBPOENA DUCES TECUM

TO:

GREETINGS: You are hereby commanded to appear before the Board of Trustees of the Police Pension Fund of the City of Des Plaines, Illinois, in the above captioned proceeding on _____, _____, at _____ a.m., at City Hall, Room _____, 1420 Miner Street, Des Plaines, Illinois 60016, pursuant to the Pension Code of Illinois.

*You are also commanded to bring with you

WITNESS, _____, Chairman of this Board, whose signature is affixed hereto on _____, _____.

President

(Seal) (* strike this portion if not applicable)

PROOF OF SERVICE

I certify that I served the original of the above subpoena by delivering it personally to the witness on _____, _____. I paid the witness the applicable witness fee.

Process Server

Subscribed and sworn to before me on _____, _____.

(SEAL)

Notary Public

City of Des Plaines Pension Fund
1420 Miner Street
Des Plaines, Illinois 60016
(847) 827-4804

FORM 2