

**Petition and Order  
Directing Compensation for  
Special Prosecutor**

**(Print or type information. Submit an original and two copies of this petition to the court.)**

Under oath I state:

1. I was appointed special prosecutor for:
  - State of Wisconsin       Other: \_\_\_\_\_
  - vs. \_\_\_\_\_, Case No. \_\_\_\_\_.
  - The period \_\_\_\_\_ to \_\_\_\_\_.
2. A complete and truthful itemization on form DOA-5186, issued by the Department of Administration, of the time involved in completing this appointment is attached.
  - This is an interim request for compensation. The duties of special prosecutor have not yet been completed.
  - This is a final billing. All duties must have been completed.
3. I request payment by the Department of Administration for these services.
4. An itemization of disbursements is attached, for which I request payment by the county.

**Payment should be sent to:**

Name of Special Prosecutor	
Complete Mailing Address	
Telephone Number	Bar Number
Social Security No. or Taxpayer ID No. (for income tax purposes)	

Subscribed and sworn to before me  
on \_\_\_\_\_

\_\_\_\_\_  
Signature of Special Prosecutor

\_\_\_\_\_  
Notary Public, State of Wisconsin

\_\_\_\_\_  
Date

My commission expires: \_\_\_\_\_

**ORDER DIRECTING COMPENSATION**

**IT IS ORDERED:**

1. The Secretary of the Department and Administration pay the total sum of \$ \_\_\_\_\_ as compensation for the special prosecutor.
2. \_\_\_\_\_ County pay disbursements in the amount of \$ \_\_\_\_\_.

**> Submit this order and itemization to:**

- |   |   |
|---|---|
| 1. Director<br>State Prosecutor's Office<br>Department of Administration<br>P.O. Box 7869<br>Madison, WI 53707-7869<br>Telephone: (608)267-2700 | 2. County Clerk of county<br>responsible for paying<br>disbursements, if<br>ordered under #2. |
|---|---|

**BY THE COURT:**

\_\_\_\_\_  
Signature of Circuit Judge

\_\_\_\_\_  
Name Printed or Typed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number