

## **Broome County Assigned Counsel Program**

## Panel Attorney Investigator Project

**Investigator Request for Payment** 

Investigator Name:		Date:	
Case:		Attorney:	
1.	. I affirm, under penalty of perjury, that I am:		
	A licensed Private Investigator in the State of New	York; or	
	O I am an employee of a licensed Private Investigator York Department of State to serve as an employee	r, and have submitted all the necessary documentation to the New of a licensed Private Investigator.	
2.	2. The services briefly described below were performed provides for the time, dates and services provided in	ed by me or under my direction. I have attached a timesheet which n more detail.	
3.	• •	ere incurred in rendering the aforementioned services:	
4.	of payment has been made for said services except:	reimbursement or compensation has been received for these services from any source and no payment or promise payment has been made for said services except:	
The	The amount requested represents the fair and reasonable	a value of said services	
1110	the amount requested represents the rail and reasonable	e value of said services.	
	(Print Name)	-	
	(Sign Name)	-	

**Please Attach: Itemized Timesheet**