



ORANGE COUNTY OFFICE OF ASSIGNED COUNSEL

Panel Attorney Investigator Services Project

Investigator Request for Payment

Investigator Name:

Attorney:

Case:

Date:

1. I affirm, under penalty of perjury, that I am:

A licensed Private Investigator in the State of New York; or
I am an employee of a licensed Private Investigator and have submitted all the necessary documentation to the New York Department of State to serve as an employee of a licensed Private Investigator.

2. The services briefly described below were preformed by me or under my direction. I have attached a timesheet which provides for the time, dates and services provided in more detail.

3. The following expenses briefly described below were incurred in rendering the aforementioned services:

4. No reimbursement or compensation has been received for these services from any source and no payment or promise of payment has been made for said services except:

The amount requested represents the fair and reasonable value of said services.

Print Name:

Sign Name:

NYS Secretary of State Private Investigator License #:

Date:

Please Attach: 1) Timesheet Detailing Services and 2) Affirmation of Expert to this Form.

Remit by E-Mail to: OAC@OrangeCountyGov.com (pdfs ONLY, please)

For OAC use: