

CIRCUIT COURT

STATE OF WISCONSIN

COUNTY

STATE OF WISCONSIN, Plaintiff vs. _____ Defendant _____ Date of Birth	STATEMENT OF PROBABLE CAUSE FOR DETENTION AND PETITION FOR REVOCAION OF CONDITIONAL RELEASE _____ Court Case Number _____ Client Number
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Date defendant was committed by the court:	Hearing is to be scheduled within 30 days of: <i>(enter date defendant was placed into custody)</i>
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Offense(s)

Date defendant was released on conditions by the court:

PROBABLE CAUSE STATEMENT (alleged violation or safety concern): Attach separate sheets as needed.

Therefore, the Wisconsin Department of Health Services petitions the court for revocation of the conditional release. Pending further court proceedings, the above named is to be detained at:

- _____ County Jail
- Winnebago Mental Health Institute
- Mendota Mental Health Institute

The Department of Health Services further requests that the court order the Sheriff to transport the defendant to the appropriate facility and return the defendant to the court for revocation proceedings, if necessary.

SIGNATURE – DHS Representative

Date Signed

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ORIGINAL TO Releasing Court

COPIES TO: Case File

Division of Care and Treatment Services Forensic Specialist
Regional Office of the State Public Defender
County Jail