



Wayne County Indigent Defense Services Dept.

Investigator/Expert Delinquent Invoice Submission Request Form

STATE OF MICHIGAN v. _____

Attorney for Defendant _____ P- _____

INVESTIGATOR/EXPERT _____

CTN _____

Vendor Number _____ Date of Payment Request _____

Case Status: Open ☐ Closed ☐

Dates of Service _____

Explanation for Prior Fiscal Year Invoice Submission:

Investigator/Expert Signature

Date

IDSD Assigned Counsel Signature

Date