

Request For Payment Plan or Extension of Time to Pay

Name: \_\_\_\_\_  
                    First  M.I.  Last

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

I have been ordered by the court to pay the following fine(s) or forfeiture(s). I request to be allowed to make monthly payments or be granted an extension.

Case Number(s) & Amounts

\_\_\_\_\_

*Please explain below what your circumstances are and why you need a payment plan or extension. Also, please include specifics as to how you wish to pay.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

There will be a \$15.00 fee assessed for EACH payment plan. The fee amount is due when approved for a payment plan. If the fee is not paid, the amount of \$15.00 will be deducted out of your first payment to cover the assessed payment plan fee.

\_\_\_\_\_  
Defendant’s Signature

Date: \_\_\_\_\_

Payment plan is approved and defendant shall make payments in the amount of \$\_\_\_\_\_ per month, starting on \_\_\_\_\_ and continuing on the \_\_\_\_\_ day of each month thereafter, until all court obligations are paid in full.

Payments can be made in person, by mail to the Jackson County Clerk of Court, 307 Main St., Black River Falls, WI 54615, or by credit/debit card by calling GPS at 888-604-7888, 24 hours a day, or online at www.allpaid.com., they will ask for a pay location code, which is 2038.