STATE OF WISCONSIN, CIRCUIT COURT,		COUNTY	
Case Caption:		Application for Pro Hac Vice Admission	
		Case No	
I DECLARE UNDER PENALTY OF PERJURY:			
1.	That I seek to appear pro hac vice in ord captioned matter;	der to represent	in the above-
2.	That I am admitted to practice law in the	highest court(s) of the state(s) or country	(ies) of;
3.	That there are no disciplinary complaints filed against me for violation of the rules of those courts (if so, please explain):;		
4.	That I am not suspended or disbarred from practice for disciplinary reasons or reason of medical incapacity in any jurisdiction (if yes, please explain):;		
5.	That I am associated with Attorney, State Bar No, an active member of the State Bar of Wisconsin (name the member of the State Bar of Wisconsin and provide his/her Member Number);		
6.	That I do not practice or hold out to practice law in the State of Wisconsin;		
7.	That I acknowledge the jurisdiction of the courts of the State of Wisconsin over my professional conduct, and I agree to abide by the rules of the relevant division of the Circuit Court of the State of Wisconsin, the Wisconsin Court of Appeals, the Wisconsin Supreme Court, and the Rules of Professional Conduct for Attorneys, if I am admitted pro hac vice;		
8.	That I have complied fully with SCR Rule 10.03 (4);		
9.	That I am applying for admission pro hac vice for the following reasons:		
I have applied for admission pro hac vice in the courts of the State of Wisconsin times previously in this calendar year.  I attach hereto evidence of my payment or prior payment of the pro hac vice fee.			
Signature of Attorney		Telephone Number	
Name Pri	nted	Email Address (if any)	
Address of Principal Office			