

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

State of Wisconsin, Plaintiff

Amended

-vs-

Defendant's Name \_\_\_\_\_

**Verification of Time Served  
§973.195, Wis. Stats.**

Date of Birth \_\_\_\_\_

Case No. \_\_\_\_\_  
Count No. \_\_\_\_\_

1. The total length of the inmate's original sentence on this count is \_\_\_\_\_ years, \_\_\_\_\_ months, \_\_\_\_\_ days.
2. The initial term of confinement on this count is \_\_\_\_\_ years, \_\_\_\_\_ months, \_\_\_\_\_ days.
3. The initial term of extended supervision on this count is \_\_\_\_\_ years, \_\_\_\_\_ months, \_\_\_\_\_ days.
4. All subsequent terms of confinement ordered on this count: \_\_\_\_\_
5. The initial term of confinement has been adjusted due to disciplinary dispositions (bad time) to increase the initial term of confinement on this count by \_\_\_\_\_ years, \_\_\_\_\_ months, \_\_\_\_\_ days. The initial term of extended supervision has been adjusted to decrease the initial term of extended supervision by the same amount. (*This adjusted period of confinement must be added to the initial term of confinement for purposes of making the percentage calculation.*)
6. The subsequent term of confinement has been adjusted due to disciplinary dispositions (bad time) to increase the subsequent term of confinement on this count by \_\_\_\_\_ years, \_\_\_\_\_ months, \_\_\_\_\_ days. The subsequent term of extended supervision has been adjusted to decrease the subsequent term of extended supervision by the same amount. (*This adjusted period of confinement must be added to the subsequent term of confinement for purposes of making the percentage calculation.*)
7. The inmate has served on this count a total of \_\_\_\_\_ years, \_\_\_\_\_ months, \_\_\_\_\_ days in confinement.
8. The inmate  does  does not have another sentence(s). (Attached are copies of judgment(s) of conviction of any other sentence(s).)
9. This information is accurate as of the date of signing.

**I declare under the criminal penalty of false swearing  
that the information I have provided is true and  
accurate.**

►  
Signature \_\_\_\_\_

Name Printed or Typed \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Date \_\_\_\_\_

State Bar No. (if any) \_\_\_\_\_

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1. Court