

**CLIENT INFORMATION AND NOTIFICATION OF FEES FOR SERVICES
LA CROSSE COUNTY JUSTICE SUPPORT SERVICES**

Client Name: _____

Address: _____ Soc. Sec. # _____

City: _____ State: _____ Zip: _____ Date of Birth: _____

Phone #: _____ Gender: Male Female Other _____

**PLEASE LET US KNOW IF YOU NEED ACCOMODATIONS OF ANY KIND
TO ENABLE YOU TO USE OUR SERVICES.**

As a participant in the La Crosse County Justice Support Services program you may be required to receive certain services for which you will be charged a fee. The following is a list of costs for our services:

SERVICES FOR WHICH YOU WILL BE CHARGED:

PRE-CHARGE AND POST-CHARGE DIVERSION:

Diversion Fees - \$27.00 per month

EQUIPMENT:

GPS - \$18.00 per day

Remote Breath - \$18.00 per day

DRUG AND ALCOHOL TESTING:

\$130.00 per month for the following programs:

Sentenced

Diversion (pre and post charge)

Family Court

IDP Program

Out of County Cases

OWI Program

Veterans Court

DOC

DRUG COURT:

Drug Court Fee -- \$750.00 – can be reduced by \$250 through Community Service - please talk to your SW.

OWI COURT:

OWI Court Fee - \$500.00

LOST OR DAMAGED EQUIPMENT:

You will be charged for any equipment that is either lost or returned damaged. The cost will depend on the current replacement cost OR the cost of repairing damaged equipment. As of today, the replacement cost of your equipment is: \$_____.

CONFIRMATION TESTING

\$40.00 for sending a positive UA sample to a confirmation lab.

THE FOLLOWING PROGRAMS DO NOT CHARGE FOR SERVICES (except for lost or damaged equipment): Bond and Human Services referrals. No charge for testing only for Drug Court and OWI Court.

ALL FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

You will be billed monthly for services provided by JSS. Failure to inform us of an address change or to make payments could result in your account being referred to a collections agency.

You may be eligible for a reduced or waived fee based on your financial situation. We recommend that you make this request at the time of your case opening for maximum benefit. This benefit is not applied retroactively, so you must apply ASAP.

To determine if you are eligible for a reduced or waived fee, please contact our Fiscal Department at (608) 785-5906 or send an email to hsfiscalbilling@lacrossecounty.org to request a financial screening.

Contact the Justice Support Services Offices at 789-4895 to discuss any other issues or questions you may have.

Signature _____ Date _____

Staff Signature _____ Date _____

#9 (12/17) (3/18 TB) (12/18 TB) (11/19 TB) (1/20 TB/BS) (3/21/TB)

NAME: _____

AVATAR: _____

DATE: _____

EPISODE

JSS CODE