

LANGLADE COUNTY HUBER TRANSFER REQUEST
(LANGLADE TO ANOTHER COUNTY)

SENTENCED INMATES REQUESTING A TRANSFER FROM LANGLADE COUNTY TO ANOTHER COUNTY NEED TO COMPLETELY FILL OUT THIS TRANSFER REQUEST FORM AND RETURN THE COMPLETED FORM TO A HUBER OFFICER MON-SUN BETWEEN 6A-6P. THIS COMPLETED FORM WILL BE FAXED ALONG WITH YOUR JUDGEMENT OF CONVICTION TO THE COUNTY YOU ARE REQUESTING TO TRANSFER TO. IT IS YOUR RESPONSIBILITY TO CONTACT OUR HUBER OFFICERS FOR INFORMATION CONCERNING THIS TRANSFER AT (715)627-6442.

REQUEST TO TRANSFER FROM LANGLADE COUNTY TO: _____

DATE SCHEDULED TO REPORT: _____

NAME (LAST, FIRST, MI) _____

DATE OF BIRTH: _____

HOME ADDRESS: _____

HOME PHONE NUMBER: _____

EMPLOYMENT INFORMATION

EMPLOYER: _____

EMPLOYER ADDRESS: _____

EMPLOYER PHONE NUMBER: _____

CONTACT PERSON: _____

WORK SCHEDULE: _____

COUNTY ACCEPTING/DENYING TRANSFER

() ACCEPT REPORT DATE/TIME _____

FEES NEEDED IN ADVANCE AND ANY SPECIAL CONDITIONS FOR ACCEPTANCE: _____

() DENIED REASON: _____