



WASHINGTON STATE  
OFFICE OF PUBLIC DEFENSE  
*Appellate Program*

# Mid-Year Extraordinary Compensation Affidavit

## Case and Counsel Information

FOR OPD USE ONLY

COA No.: \_\_\_\_\_  
Case Name: \_\_\_\_\_  
Firm Name: \_\_\_\_\_  
Attorney Name: \_\_\_\_\_  
SWV No.: \_\_\_\_\_

## Reason for Request

- Extraordinary travel expense
- Extraordinary copying/ mailing costs
- Extraordinary interpreter/ translator costs
- Other

### Expense Pre-Approved by OPD?

- Yes
- No

Total Extraordinary Expense Incurred \_\_\_\_\_

Provide a brief narrative explaining the extraordinary expense and why it was necessary for this case

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct:

By: \_\_\_\_\_  
Signature

\_\_\_\_\_ Date

\_\_\_\_\_ Location

### Mail form to:

Appellate Program  
Washington State Office of Public Defense  
PO Box 40957  
Olympia, WA 98504-0957