**Documents Submitted at Fact Finding Review**

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

This form must be completed by the Fact Finder following the Fact Finding Review appointment. At the conclusion of the Fact Finding Review appointment, the Fact Finder must give the petitioner a copy of this completed form along with copies of any documentation submitted.

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| Documentation Submitted: (**Attach copies.)**      |

**Sworn Statement:**

**I swear or affirm that the facts I provided today are true and correct to the best of my knowledge.**

|  |  |
| --- | --- |
| Applicant/Participant Signature | Date Signed |
| Applicant’s/Participant’s Representative’s Signature | Date Signed |
| W-2 Agency Representative Signature | Date Signed |
| W-2 Agency Representative Signature | Date Signed |
| Fact Finder Signature as Witness | Date Signed |