

CONFIDENTIAL
REQUEST FOR PAE: PRE-AUTHORIZED EXPENSE (ORS 135.055(3))
PSYCHO-SEXUAL EVALUATION SHORT FORM

<input type="checkbox"/> Retained	<input type="checkbox"/> Appointed
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County: _____ Case Type: _____ Case Number: _____

Client's First Name: _____ Client's Last Name: _____

Attorney Name: _____ Bar #: _____ Email: _____

Provider's Name: _____ Business Name: _____

Provider's City: _____ Phone: _____

****If assigned to more than one case for a client, select case number with the highest charge. This form may only be used once****

Number of hours requested: _____ *If additional hours are needed, please use the long form and include justification.*

Is the evaluator providing bilingual services for this evaluation? Yes No

Provider agrees to work at their OPDC established rate

If not, please use the long form and include justification. If this is a new provider that does not have an OPDC established rate please use the long form and include a CV.

Attorney certifies that the following applies (please check all that apply):

Client is charged with a sex offense.

If not, please use the long form and provide justification as to why this evaluation is reasonable and necessary

This is the first request for a Psycho-Sexual Evaluation.

If this is not the first request or if this is a request for additional hours, please use the long form.

This evaluation is requested pursuant to ORS 163A.030.

Are you requesting any travel expenses? Yes No

DEPARTING FROM: _____ **ARRIVING AT:** _____

MILEAGE - ESTIMATED NUMBER OF MILES: _____ **TRAVEL TIME - HOURS:** _____

I am the attorney representing the client named on this form. By submitting this form, I certify that I believe a Psycho-Sexual Evaluation is necessary for the representation of my client. I have reviewed and approve this submission.

Signature of Attorney*

Submission/Effective Date

PLEASE NOTE: Services/expenses prior to the effective date will not be paid. If request needs to be backdated, the long form must be used in order to provide justification.

*Electronic signature is valid. There is no need to print and sign this document.