

STATE OF WISCONSIN

Plaintiff,

Case No: \_\_\_\_\_

vs

\_\_\_\_\_  
Defendant.**WAIVER OF RIGHT TO  
PRELIMINARY HEARING &  
ORDER TO BIND OVER**

I, \_\_\_\_\_, the defendant in the above-captioned matter, hereby waive my right to a preliminary examination on the felony charge(s) pending against me.

Please answer YES or NO to the following:

**BY GIVING UP MY RIGHT TO A PRELIMINARY EXAMINATION:****YES NO**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 1. I understand that the State would have the burden of proof at a preliminary hearing to show that a felony was probably committed and that I committed it. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I understand that at a preliminary hearing my attorney or I could ask questions of any witnesses called by the State.                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I understand that at a preliminary hearing my attorney or I could produce evidence on my behalf.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. I understand that it is sometimes possible to discover things about my case at a preliminary hearing including possible defenses to a charge.             | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. I understand that if the State does not meet the burden of proof the case will be reduced or dismissed.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. I wish to give up my right to a preliminary hearing.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. I understand that as a result of waiving the preliminary hearing my case will be set for further proceedings.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Has anyone threatened you or promised you anything to get you to waive your right to a preliminary hearing?   | <input type="checkbox"/> | <input type="checkbox"/> |

9. Can you read, write and understand English?
10. Are you under the influence of drugs, alcohol or medication?

**I have read the above questionnaire and answered all questions truthfully.**

Defendant: \_\_\_\_\_ Date: \_\_\_\_\_.

ATTORNEY'S ACKNOWLEDGMENT

I, \_\_\_\_\_, state that I am the attorney for the above-named defendant, that: the defendant personally read the questionnaire in my presence; I read the questionnaire to the defendant; I discussed and explained the contents of the questionnaire to the defendant; the defendant acknowledged his/her understanding of each item in this questionnaire; I personally observed the defendant sign and date this questionnaire.

Attorney: \_\_\_\_\_ Date: \_\_\_\_\_.

**ORDER TO BIND OVER**  
(for Waiver of Right to Preliminary Hearing)

The Court finds the defendant's waiver of the preliminary hearing was free, voluntary and intelligent. Based upon the waiver, the defendant is bound over to the Circuit Court for trial Bond is continued.