

PRETRIAL DIVERSION MONTHLY REPORT

SUPERVISION REPORT FOR THE MONTH OF

NAME:	TELEPHONE NUMBER:
ADDRESS:	HAVE YOU MOVED? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, give date and explain:
LIST PERSONS LIVING WITH YOU:	HAVE YOU CHANGED JOBS? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, give date and explain:
NAME AND ADDRESS OF EMPLOYER OR SCHOOL:	IF UNEMPLOYED, HOW DID YOU SUPPORT YOURSELF?
JOB DESCRIPTION AND GROSS AMOUNT EARNED FROM EMPLOYMENT:	LIST ALL DEBTS PAST DUE AND AMOUNTS:
HOW MANY DAYS OF WORK OR SCHOOL DID YOU MISS: [] Why?	WERE YOU ARRESTED OR QUESTIONED BY LAW ENFORCEMENT OFFICIALS? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes:
LIST ALL MONEY RECEIVED OTHER THAN FROM EMPLOYMENT, INCLUDING SPOUSE'S INCOME, LOANS, RELIEF BENEFITS, ETC.: Give source:	DATE:
	PLACE:
	DETAILS:
	DISPOSITION:
LIST ALL VEHICLES OWNED OR DRIVEN BY YOU: <u>Year</u> <u>Make</u> <u>Color</u> <u>Lic. #</u> 1) 2) 3) 4)	DO YOU HAVE A RESTITUTION OBLIGATION? Yes <input type="checkbox"/> No <input type="checkbox"/> HAVE YOU MADE A PAYMENT THIS MONTH? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, explain: DO YOU HAVE A COMMUNITY SERVICE OBLIGATION? Yes <input type="checkbox"/> No <input type="checkbox"/> HAVE YOU COMPLETED ANY HOURS THIS MONTH? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, explain:

NOTE: A FALSE OR DISHONEST ANSWER TO A QUESTION IN THIS REPORT MAY RESULT IN THE REVOCATION OF YOUR PRETRIAL DIVERSION PROGRAM AND HAVING YOUR CASE REFERRED TO THE U.S. ATTORNEY FOR PROSECUTION.

SIGNATURE:	DATE:
USPO COMMENTS: How form was obtained: Mail <input type="checkbox"/> OV <input type="checkbox"/> HC <input type="checkbox"/> CV <input type="checkbox"/>	RETURN THIS FORM TO:
SIGNATURE OF USPO:	US PROBATION OFFICER 215 DEAN A MCGEE, SUITE 201 OKLAHOMA CITY, OK 73102 (405) 609-5800

**THIS REPORT IS DUE IN THE PROBATION OFFICE
NO LATER THAN THE 5TH OF THE MONTH.**