U.S. Probation & Pretrial Services – District of Arizona

Community Work Service Program – Time Sheet

Name: _____ **Docket No:** _____ **Judge:** _____

Hours required: _____ **Probation Officer:** _____

Date Worked	Time In	Time Out	# Hours Worked	To Date Hours Completed	To Date Hours Remaining	Certifying Signature

Organization: _____ **Contact Person:** _____

Address: _____ **Contact Phone:** _____

Any false entries will be considered a violation of the Court order.
Note: Traveling time, lunch, and breaks, etc., are not to be counted as hours completed.