



HARRIS COUNTY DOMESTIC RELATIONS OFFICE
 Community Supervision Unit
 1310 Prairie Street Suite 600, Houston, Texas 77002
 Tel: (713) 274-7302 and Fax (713) 437-4732

Mail-In

Officer:

Due Date:

PROBATIONER'S MONTHLY REPORT

Name: _____ Cause # _____

Address: Street _____ Apt. No _____ City _____ State _____ Zip Code _____
 Check here if new address

Telephone: Home _____ Cell/Work: _____

With whom are you living? _____ Relationship: _____

Employer: _____ Address: _____
 Name of Company No., Street, City, Zip Code

Occupation: _____ Employer's Phone Number: _____

How long on this job? _____ Supervisor: _____ Monthly earnings: _____

What days of the week do you work? Please circle: Mon., Tues., Wed., Thurs., Fri., Sat., and Sun

What hours do you work? From _____ to _____

CHECK THE APPROPRIATE ANSWER

Yes No

Are you currently in Dad's Count or Building New Beginnings classes?
 (List below date started, expected start date or date finished)

Are your child support payments being deducted by Wage Assignment?

Does your child have health insurance? (If yes, from what source?) _____

Have you been arrested since your last report? (If yes, explain below) _____

Have you violated any other conditions of your probation since your last report? (If yes, explain) _____

Do you own or drive a vehicle? Owner: _____ Make/Model: _____
 Year: _____ Color: _____ License: _____

Do you receive child support/welfare/food stamps or any other source of income? (If yes, list amount and sources) _____

Are you currently participating in any programs (alcohol, community service, etc?)
 (If yes, explain) _____

Do you have any problem you would like to discuss with your Community Supervision Officer?

I acknowledge that the above information is true and correct.

X _____
 Probationer's Signature/Date

 Community Supervision Officer