



Sixth Judicial District Department of Correctional Services

[Click here to enter text.](#) | [Click here to enter text.](#) | [Fax](#) [Click here to enter text.](#) | www.iowacbc.org

Pre-Trial Report

Date: _____

Name: _____ Age: _____ Offender #: _____
County/Cause: Linn _____
Charge(s): _____

Factors:

1. Current violent offense
2. Pending charge currently
3. Prior misdemeanor conviction(s)
4. Prior felony conviction(s)
5. Prior violent conviction(s)
6. Failure to appear in last 2 years

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

Submitted by: [Click here to enter text.](#), [Click here to enter text.](#)

For Public Information Only