

**JUDICIAL DISTRICT DEPARTMENT OF CORRECTIONAL SERVICES
CBC DISCHARGE REPORT**

Date:

ICON #:

NAME:

CITIZENSHIP STATUS:

Jurisdiction Offense Description	Cause Number	Charge Count Class	SDD
Supervision Status		Start Date	
Sentence Date	Penalty Type	Penalty Value	Penalty Modifier

Progress of Supervision/Restitution-Fees Status/Recommendations:

EMPLOYMENT STATUS: *

FINANCIAL BALANCES:

Court Costs/Fees/Fines: \$* / Balance: \$*

Victim Restitution Owed: \$* / Balance: \$*

Supervision Fee: \$* / Balance: \$*

FAMILY – MARITAL -LIVING ARRANGEMENT: *

DRUGS –ALCOHOL – EVALUATION - TREATMENT: *

ARREST - PENDING CHARGES: *

DNA: (Type Yes-date taken; No-reason not taken; or NA)

SUMMARY - RECOMMENDATION: *

Respectfully submitted,

Agent's Name
Agent's Title

Supervisor's Name
Supervisor's Title

Region/Work Unit:

Distribution: Judge, County Attorney, File // Offender, File