

MAINE JUDICIAL BRANCH

STATE OF MAINE

"X" the court for filing:

- Superior Court District Court
- Unified Criminal Docket

V.

County: _____

Location (Town): _____

Docket No.: _____

Defendant

PROOF OF COMMUNITY SERVICE/PUBLIC SERVICE PERFORMED

Section 1 – To be completed by community/public service work (C/PSW) participant:

Name: _____ Date of birth (mm/dd/yyyy): _____

Total number of hours needed: _____

To be completed by (mm/dd/yyyy): _____

Section 2 – To be completed by Organization:

Organization name: _____

Address: _____

Telephone: _____

Supervisor name: _____ Telephone: _____

Itemization of days and hours worked by C/PSW participant (attach a separate sheet if needed):

C/PSW participant's work performance was: Highly satisfactory Satisfactory Unsatisfactory

Comments:

Date (mm/dd/yyyy): _____



For the Organization

Printed Name

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