

**GRAYSON COUNTY
COMMUNITY SUPERVISION AND CORRECTIONS DEPARTMENT
REPORT FORM**

Check One: **Bond** **Probation**

Date _____ Are you making a payment? Yes No Amount \$ _____

Name _____

Present Address _____

City / State / Zip _____

Cell / Home Phone _____ Email _____

Who do you live with? _____

Emergency Contact Name and Number _____

Employer _____ Employer's Phone Number _____

Address of Employment _____

Nature of Work _____ What hours do you work? _____

Do you operate an automobile? Yes No Make _____ Model _____

Year and color of automobile _____ Tag Number _____

Are you behind in paying your fees? _____

If so, when will you bring your fees current? _____

Have you had any contact with law enforcement since your last visit? Yes No

If so, please explain _____

Do you have anything to discuss with your supervision officer? Yes No

If so, please explain _____

Has any of the above information changed since your last visit? Yes No

If so, please explain _____

Defendant Signature _____

Report Received By _____ Date _____