

**GRANT COUNTY DISTRICT COURT
PROBATION DEPARTMENT
P.O. BOX 1204
EPHRATA, WA 98823**

MONTHLY PROBATION REPORT FORM

THIS FORM IS DUE ON: _____ PROBATION CASE # _____

RETURN THIS FORM BY MAIL OR IN PERSON.

YOUR PROBATION PERIOD EXPIRES ON _____
OR WHEN YOUR TREATMENT IS COMPLETED, WHICHEVER IS LONGER.

PROBATIONER: COMPLETE ALL SECTIONS OF THIS FORM. SIGN AND DATE FORM. IF FORM IS RECEIVED INCOMPLETE IT WILL BE SENT BACK TO YOU.

My Probation Officer is: **Angie L. Hightower** **Rick J. Bomar**

1. Name _____
(PRINT CLEARLY PLEASE)

Present address (also mailing address) _____

City and State _____ Zip Code _____

Your telephone/message number _____ Date of Birth _____

2. Present Employer _____

Address _____

Your position or job title _____ Monthly Salary \$ _____

3. If unemployed, from what source do you receive your income? _____

Amount per month \$ _____

4. Are you attending school or college? _____ If so, give name of school/college _____

5. Do you owe fines or restitution resulting from this case? _____ If so, are you making regular payments as agreed with the court? _____ If not, explain _____

6. Present Marital Status (circle one): Single Married Separated Divorced Widower

7. **GIVE THE NAME AND ADDRESS OF YOUR TREATMENT CENTER** _____

NAME OF YOUR COUNSELOR _____

ARE YOU CURRENTLY IN COMPLIANCE? Yes No

➤ **OVER**

8. Do you have a valid Driver's License? **Yes No** Do you have Auto Liability Insurance? **Yes No**
If yes, submit written proof of Auto Liability Insurance (Vehicle Insurance Card) and a photocopy of your valid Drivers License and/or Department of Licensing ID card. This must be submitted every three months during your probation period.

9. Are you currently on Electric Home Monitoring? **Yes No** If So, give date of termination: _____

10. Are you required to have Ignition Interlock on all vehicles you operate? **Yes No**
IF YES, NAME OF INTERLOCK COMPANY _____

ADDRESS AND PHONE NUMBER OF COMPANY _____

Or please send copy of your contract you signed with the Interlock Company

11. **HAVE YOU BEEN ARRESTED AND/OR RECEIVED A TICKET FOR ANY CRIMINAL TRAFFIC VIOLATIONS SINCE YOUR LAST REPORT? Yes No**

IF YES, EXPLAIN: (offense, date, city, ticket number)

12. If you need assistance, please explain _____

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FOR ASSISTANCE AND APPOINTMENTS, CONTACT:

ANGIE L. HIGHTOWER, Probation Officer
Ephrata Office 754-2011, ext 373
Toll Free 1-800-572-0119, ext. 373

Sign Here

RICK J. BOMAR, Probation Officer
Ephrata Office 754-2011, ext 386
Toll Free 1-800-572-0119, ext 386
Moses Lake Office 766-6559

Date

NOTE:

BE SURE TO COMPLETE THIS FORM WITH ACCURATE INFORMATION. ALL ARRESTS ARE TO BE REPORTED WHETHER CONVICTED OR NOT. YOUR FAILURE TO DO SO MAY RESULT IN MONTHLY IN PERSON REPORTING.