



**CERTIFICATE OF PERFORMANCE
 OF COMMUNITY SERVICE**

Case No. _____
 Court _____
 County _____
 Division _____

This will certify that _____ has performed community service
 (Defendant's Name)
 at the direction of _____ as follows:
 (Court)

1. The nature of the supervised community service has been:

2. Such service has been performed at the following times:

COLUMN I		COLUMN II		COLUMN III	
Date	No. Hours	Date	No. Hours	Date	No. Hours
Total Hours: _____		Total Hours: _____		Total Hours: _____	
TOTAL COLUMNS I, II AND III: _____					

OR
 3. Defendant failed to complete community service as court ordered.
 This will further certify that throughout the period of the Defendant's community service this organization has at all times remained a public agency, nonreligious-sponsored nonprofit, charitable, or service organization.

 Date

 Signature

 Title

FOR COURT USE:

_____, 2_____
 Date

 Clerk

By: _____
 Deputy Clerk