

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

MONTHLY PROBATION REPORT FORM
RETURN THIS FORM BY MAIL OR IN PERSON

MY PROBATION OFFICER IS: () PAM L. YOUNG () ANGIE L. HIGHTOWER

THIS FORM IS DUE ON: _____ PROBATION CASE # _____

COURT CASE # _____

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.

1. Name _____
(PRINT CLEARLY PLEASE)

Date of Birth _____

Present physical address _____

City and State _____ Zip Code _____

Present mailing address _____

City and State _____ Zip Code _____

Telephone number/ Cell number/ Message number _____

2. Present Employer _____

Address _____

City and State _____ Zip Code _____

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? _____ name of school _____

5. Do you owe fines or restitution resulting from this case? _____

If yes, are you making regular payments as agreed with the court? _____

Explain _____

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

7. **ARE YOU CURRENTLY IN A TREATMENT PROGRAM?** _____
WHAT IS THE NAME OF THE AGENCY? _____
WHAT IS THE PHONE NUMBER OF THE AGENCY? _____
WHO IS YOUR COUNSELOR? _____
ARE YOU IN COMPLIANCE? _____ **WHY?** _____
8. Do you have a valid Driver's License? _____ Do you have Auto Insurance _____
If yes, submit written proof of Auto 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? _____ give date of termination _____
10. Are you required to have Ignition Interlock on all vehicles that you operate? _____
If yes provide the name of Interlock Company _____
Address _____ **Phone Number** _____
(Please send copy of your contract your contact 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?** _____
Explain (provide offense, date, city, and ticket number)

12. Do you have any questions? _____

Sign Here

Date

HOW TO CONTACT YOUR PROBATION OFFICER:

Pam L Young, Probation Officer
Ephrata Office (509)754-2011 ext 386

Angie L. Hightower, Probation Officer
Ephrata Office (509) 754-2011 ext 373

Moses Lake Office (509) 765-9209 ext 16
Toll Free 1-800-572-0119 ext 386

NOTE: Be sure to complete this form with accurate information. All arrests are to be reported whether convicted or not. **FAILURE TO DO SO MAY RESULT IN MONTHLY IN PERSON REPORTING.**