

**DISTRICT OF COLORADO
PRETRIAL SERVICES DIVISION
WRITTEN SUPERVISION REPORT**

Name: _____

When is your next court date? _____

Type of hearing: _____

Current Address: _____

Home phone #: _____

Have you moved in the past month? Yes No Reason: _____

New address: _____

New phone #: _____

Name of employer: _____

Address: _____

Work phone #: _____

Is employer aware of your pretrial status? Yes No

Have you changed jobs in the past month? Yes No Reason: _____

Name of new employer: _____

Address: _____

New work phone #: _____

Is new employer aware of your pretrial status? Yes No

Have you been questioned by law enforcement or arrested since your last report? Yes No
If yes, provide the following information: when, where, by whom, charge, and status of case:

I CERTIFY THAT ALL ANSWERS ARE COMPLETE AND CORRECT. I UNDERSTAND THAT A FALSE STATEMENT MAY RESULT IN REVOCATION OF MY RELEASE, IN ADDITION TO PROSECUTION UNDER 18 U.S.C. §1001.

Signature

Date

Reviewed by: _____
Officer's Signature

Date

MAIL OR DELIVER THIS FORM BY
THE FIFTH OF EACH MONTH TO: