

# **ORIENTATION TO SUPERVISION**

**UNITED STATES PROBATION OFFICE  
DISTRICT OF COLORADO**

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## INTRODUCTION

As part of your sentence, you will be supervised in the community by a U.S. Probation officer. Your supervision may be either probation, supervised release, or parole. In any event the conditions will be essentially the same. The purpose of supervision is to enforce compliance with the conditions of release, protect the public by minimizing risk, and to provide services to you to assist you in maintaining a law-abiding lifestyle. United States probation officers serve as officers of the court and as agents of the U.S. Parole Commission. They are responsible for the supervision of all persons conditionally released to the community by the courts, the Parole Commission, the Federal Bureau of Prisons, and military authorities. **Their supervision mission is to execute the sentence, control risk, and to promote law-abiding behavior.**

To accomplish these objectives, the probation officer assigned to you has the following responsibilities:

- To instruct you as to the conditions specified by the court or the Parole Commission.
- To keep informed as to your compliance with the conditions of supervision.
- To keep informed as to your conduct and to report your conduct and status to the sentencing court or Parole Commission.
- To use all suitable methods, consistent with the conditions specified by the court, to bring about improvements in your conduct and your situation.
- To assess the level of risk you may pose to the community and establish a supervision plan to minimize your risk to the community.
- To utilize risk control supervision activities, such as verification of employment and sources of income, investigation of your financial situation, monitoring of your associations, conducting record checks, placing restrictions on your travel, and testing for drugs and alcohol.
- To request modification of the conditions of supervision, if necessary, to reduce risk. Such modifications may include home detention, community confinement, and participation in treatment.
- To systematically review your conduct and your situation and revise your supervision plan in accordance with changes in your level of risk to the community.
- To assess the problems you may be experiencing that are likely to be associated with future criminal conduct, such as drug addiction, unemployment, drug problems, alcohol problems, financial problems, lack of residence, or family problems, and develop a plan to address these problems.

- To refer you to community resources to assist you in dealing with these problems.

The purpose of the orientation manual is to thoroughly explain the conditions, the purpose for each condition, and what is required of you to be in compliance with each condition.

## **MANDATORY CONDITIONS OF SUPERVISION**

### **Probation**

#### **1. YOU SHALL NOT COMMIT ANOTHER FEDERAL, STATE, OR LOCAL CRIME DURING THE PERIOD OF SUPERVISION.**

- If you are involved in any type of criminal activity, you pose a significant risk to the community. Any violation of the law is immediately reported to the court. Based on the seriousness of the offense and the risk you pose to the community, a recommendation may be made to the court to proceed with a violation hearing prior to a conviction.
- The probation officer monitors this condition through contact with local law enforcement, periodic records checks, NCIC tracking and other means available.

#### **2. YOU SHALL NOT POSSESS ILLEGAL CONTROLLED SUBSTANCES AND YOU SHALL NOT POSSESS A FIREARM OR OTHER DANGEROUS WEAPON.**

- Your possession of controlled substances or weapons poses a significant risk to the community.
- Possession of a firearm is defined as your ability to have access to a firearm. If you live with someone who has a firearm and you have access to it, you are considered to be in possession and in violation of this condition.
- Such items as hunting knives and weapons used in martial arts are also considered dangerous weapons and prohibited.
- Knowing and willful use of a controlled substance constitutes possession. A positive urinalysis test will be reported immediately to the court and a revocation hearing may be set.
- If the court finds that you were in illegal possession of a controlled substance (you were actually caught with drugs in your possession), the court may revoke your probation.

- If the court finds that you were in possession of a firearm, the court must revoke your probation and impose any other sentence that was available at the time of your original sentencing.

**3. THE DEFENDANT SHALL REFRAIN FROM ANY UNLAWFUL USE OF CONTROLLED SUBSTANCES. DEFENDANT SHALL SUBMIT TO ONE DRUG TEST WITHIN 15 DAYS OF RELEASE ON PROBATION OR SUPERVISED RELEASE AND AT LEAST TWO PERIODIC DRUG TESTS THEREAFTER, AS DIRECTED BY THE PROBATION OFFICER.**

- This applies for offenses committed after September 13, 1994.
- This does not apply for cases with a special condition for substance abuse testing.

**Supervised Release**

- Same mandatory conditions as probation.
- If the court finds that you were in illegal possession of a controlled substance (you were actually caught with drugs in your possession), the court must revoke your supervised release.

**Parole**

- Same mandatory conditions as probation and supervised release.
- If a fine was imposed, you shall make a diligent effort to pay the fine in accordance with the judgment.

**STANDARD CONDITIONS OF SUPERVISION****1. YOU SHALL NOT LEAVE THE DISTRICT OF COLORADO WITHOUT THE PERMISSION OF THE COURT OR THE PROBATION OFFICER.**

- The probation officer is responsible for knowing your whereabouts at all times. Any requests for travel out of the district are carefully reviewed and verified before travel is granted.
- Travel may be denied for the following reasons:
  - a. Your conviction or past criminal behavior involved extensive travel.
  - b. You are not current on fine or restitution payments or community service hours.
  - c. You are not in compliance with all conditions of supervision.
  - d. The probation officer is unable to verify your travel.
  - e. Your travel would interfere with court-ordered treatment.
  - f. The district you plan to travel to has certain restrictions that prohibit you from traveling to that district.
- In the event you plan to travel, you must provide the probation officer with verification of the address, dates of travel, reason for the travel, name of a person we can contact to verify the travel, and how you plan to finance the travel. If you have a fine, restitution, or community service, you must establish that you are current on payments or hours. This information must be provided at least three weeks prior to travel, unless it is a verified emergency. A copy of the travel request can be found in the appendix.
- Any international travel must be approved by the court or the U.S. Parole Commission. The request must be submitted at least six weeks in advance.
- **You may not leave the District of Colorado without the permission of the probation officer.**
- You generally will not be allowed to travel outside of the district during the **first 60 days of supervision.**

- You may travel within the state of Colorado without a travel permit; however, if you are going to be gone for more than two days, you should advise your probation officer.

**2. YOU SHALL REPORT TO THE PROBATION OFFICER IN A MANNER AND FREQUENCY DIRECTED BY THE COURT OR PROBATION OFFICER.**

- In order to maintain knowledge of your current status and situation, the probation officer will meet with you periodically. The frequency that you are seen by your probation officer is based on your risk to the community, your compliance with all of the conditions of supervision and the types of problems you may be experiencing.
- You must report to the probation officer as directed and you must permit the probation officer to contact you at your residence or elsewhere with or without an appointment.
- Report as directed means that you must keep appointments with the probation officer, you must make yourself available for meetings with the probation officer, and be able to give an account of yourself.
- On a yearly basis, you may be required to submit copies of income tax returns, both personal and corporate, if applicable.
- You may also be required to provide other documentation during meetings with the probation officer. These include, but are not limited to, bank statements, copies of bills, copies of legal documents (i.e., bankruptcy discharge, law suite, etc.), copies of checks, court registries, and statements of earnings.
- The probation officer must verify your source of income and its legitimacy; and, therefore, may request the above information on a periodic basis.
- You may be required to provide written or electronic monthly documentation of your status in either the form of a written monthly supervision report or using the Electronic Reporting System (ERS).
- **This report must be submitted between the first and the fifth of each month. You must submit the report by the 5<sup>th</sup> of each month. Failure to do so may result in revocation of your mailing privileges, requiring you to hand deliver the report to the office each month.**

- All spaces must be completed, even if the information does not apply to you. All information must be accurate and truthful. The probation officer closely reviews these reports.
- If you do not complete the report correctly, it will be returned to you to be completed. A sample written monthly supervision report is included in the appendix to assist you in completing it.
- You must sign the report acknowledging that the information is complete, correct and truthful.
- You must attach your statement of earnings each month to the report, and any additional documentation that the report or the probation officer asks for, such as copies of tickets, summonses or other court documents.
- **WARNING: Providing false information on the report could result in revocation of your supervision and possibly an indictment for False Statements, which could lead to a new conviction.**

**3. YOU SHALL ANSWER TRUTHFULLY ALL INQUIRIES BY THE PROBATION OFFICER AND FOLLOW THE INSTRUCTIONS OF THE PROBATION OFFICER.**

- The probation officer is responsible for maintaining a thorough knowledge of your current status and situation. For this reason, you will be asked about your situation. You are required to answer these inquiries truthfully.
- The probation officer will also verify the information you provide through outside sources, such as family, employers, etc.

**4. YOU SHALL SUPPORT YOUR DEPENDENTS AND MEET OTHER FAMILY RESPONSIBILITIES.**

- The probation officer will periodically meet with family members or significant others to verify that you are meeting your family responsibilities.
- During the first sixty days the probation officer will meet with family members or significant others to explain how the supervision process will impact on them. This will include the impact on family lifestyle, restrictions on travel, firearms in the home, and an explanation of enhanced penalties so that they are aware of the consequences of your noncompliance.



- If you have been ordered to pay child support, the probation officer will require that you provide verification each month that you made the payment.
- The probation officer will periodically inquire about your finances, to verify you are meeting your family responsibilities, and to verify you are living within your means.

**5. YOU SHALL WORK REGULARLY AT A LAWFUL OCCUPATION UNLESS EXCUSED BY YOUR PROBATION OFFICER FOR SCHOOLING, TRAINING, OR OTHER ACCEPTABLE REASONS.**

- A lawful occupation should include payment by check, deductions for federal and state taxes, and Social Security taxes, if appropriate. In most cases, it will not be acceptable to receive cash payments for employment.
- The policy within the District of Colorado requires notification to your employer of your supervision status, and any prior record that might pose a risk to the employer.
- The probation officer may periodically contact you at your place of employment to verify employment. These contacts are not meant to interfere with your employment.
- Self employment is allowed only on an individual basis. At a minimum, the following criteria must be met:
  - a. It has been verified that the business is legitimate.
  - b. The business has been properly licensed, registered, incorporated, etc., if applicable.
  - c. The business has the required insurance, i.e., workman's compensation.
  - d. The probation officer is allowed to periodically review the business records, including all financial records.
  - e. All taxes are being paid and verification is being provided.
  - f. The probation officer is given the following information:
    - 1) Name, address, telephone numbers of all corporate officers.
    - 2) Federal employer identification number.

- 3) Name and address of all business bank accounts and account numbers.
- 4) Additional material as requested.

**6. YOU SHALL NOTIFY YOUR PROBATION OFFICER 10 DAYS PRIOR TO ANY CHANGE IN RESIDENCE OR EMPLOYMENT.**

- The probation officer will verify the reason for termination of employment.
- Any job changes should be discussed with your probation officer, prior to making the change. You should not quit your job unless you have been offered another job.
- If you become unemployed, you will be required to seek employment immediately and keep track of your progress. Your probation officer will assist you with job leads and referrals. A meeting with the employment specialist can be scheduled.
- If you are terminated from employment without notice, you shall notify your probation officer immediately.
- If you change residences, you must provide the probation officer with a copy of the lease agreement or mortgage, if purchasing a home.
- You must provide the names and birth dates of all individuals residing with you.

**7. YOU SHALL REFRAIN FROM EXCESSIVE USE OF ALCOHOL AND SHALL NOT PURCHASE, USE, DISTRIBUTE, OR ADMINISTER ANY NARCOTIC OR CONTROLLED SUBSTANCE OR ANY PARAPHERNALIA RELATED TO SUCH SUBSTANCES, EXCEPT AS PRESCRIBED BY A PHYSICIAN.**

- If you have a special condition for drug or alcohol treatment, you will be required to abstain from alcohol completely.
- Excessive use of alcohol refers to any use of alcohol that adversely affects your employment, your relationships, or your ability to comply with the conditions of supervision, or use of alcohol that results in the violation of any local, state or federal law, including disorderly intoxication, and/or driving under the influence.

- If you are on parole, the probation officer may instruct you to submit to urinalysis testing at anytime.
- If the probation officer has evidence that you are experiencing problems with drugs or alcohol or that you have had a history of problems, the probation officer may petition the court or Parole Commission for a modification of your conditions to add a special condition for drug or alcohol treatment.
- Additionally, no narcotic substances or paraphernalia, unless prescribed by a physician, should be taken or possessed by any person under supervision, including the medications of friends or family members. The use of non-prescribed medication which results in a positive urinalysis will result in notification to the United States District Court or the United States Parole Commission for further action.

**8. YOU SHALL NOT FREQUENT PLACES WHERE CONTROLLED SUBSTANCES ARE ILLEGALLY SOLD, DISTRIBUTED, OR ADMINISTERED, OR OTHER PLACES SPECIFIED BY THE COURT OR PAROLE COMMISSION.**

- In order to maintain a law abiding lifestyle, you will have to stay away from places and situations where illegal activity is going on. This means that you should use good judgment and common sense about the places you frequent.

**9. YOU SHALL NOT ASSOCIATE WITH ANY PERSONS ENGAGED IN CRIMINAL ACTIVITY AND SHALL NOT ASSOCIATE WITH ANY PERSON CONVICTED OF A FELONY UNLESS GRANTED PERMISSION TO DO SO BY THE PROBATION OFFICER.**

- Association is defined as any planned, prolonged or repeated contact with a person having a felony record, or engaged in criminal activity, if you knew or should have known of their felony conviction or the criminal activity in which they were engaged during the times of your association. Incidental contact is not considered association. In the event you have casual contact with a person having a felony record, you will have to report this on your monthly report.
- Incidental contact on a job site is not considered criminal association.
- Association with any convicted family member, other than immediate family, must be approved by the probation officer.

- Permission for criminal association cannot be after the fact. You must have permission prior to the association. This permission will only be granted in exceptional situations.
- 10. YOU SHALL PERMIT A PROBATION OFFICER TO CONTACT YOU AT ANY TIME AT HOME OR ELSEWHERE AND SHALL PERMIT CONFISCATION OF ANY CONTRABAND OBSERVED IN PLAIN VIEW BY THE PROBATION OFFICER.**
- The probation officer will make unannounced contacts at your home, place of employment or elsewhere on a periodic basis. These contacts can be at anytime and may occur on weekends, evenings, or holidays. Failure to cooperate is a violation of your supervision.
  - Contraband includes controlled substances, weapons, or stolen items
- 11. YOU SHALL NOTIFY THE PROBATION OFFICER WITHIN 72 HOURS OF BEING ARRESTED OR CONTACTED BY A LAW ENFORCEMENT OFFICER.**
- All contact with law enforcement must be reported. This includes traffic citations, criminal or civil arrests or questioning by any law enforcement officers.
  - You will be required to submit documentation, such as copies of summonses, bond papers, copies of complaints, information or indictments.
- 12. YOU SHALL NOT ENTER INTO ANY AGREEMENT TO ACT AS AN INFORMER OR A SPECIAL AGENT OF A LAW ENFORCEMENT AGENCY WITHOUT PERMISSION OF THE COURT OR PAROLE COMMISSION.**
- Permission is rarely granted because of the precarious position you might place yourself in and the risk factors involved.
- 13. AS DIRECTED BY THE PROBATION OFFICER, YOU SHALL NOTIFY THIRD PARTIES OF RISKS THAT MAY BE OCCASIONED BY YOUR CRIMINAL RECORD OR PERSONAL HISTORY OR CHARACTERISTICS AND SHALL PERMIT THE PROBATION OFFICER TO MAKE SUCH NOTIFICATION AND TO CONFIRM YOUR COMPLIANCE WITH SUCH NOTIFICATION REQUIREMENT.**
- The probation officer is responsible for constantly assessing the level of risk you present to the community and establishing a supervision plan to address the risk.

- Third-party risk refers to any reasonable connection that may exist between the nature of the offense or any previous criminal conduct and any employment or other activity where there would be reasonable risk of personal or financial harm to an identifiable third party or particular group of people.
- You will be required to promptly disclose your conviction or convictions giving rise to the third-party risk and also the fact that you are on supervision.
- The probation officer will then verify that the disclosure has been made.

**14. YOU SHALL PROVIDE THE PROBATION OFFICER WITH ACCESS TO ANY REQUESTED FINANCIAL INFORMATION.**

- You are required to disclose to the probation officer all of your financial dealings. You will be required to provide all of the financial records that the probation officer requires. You may be required to sign a confidential release form that will allow the probation officer access to credit reports, bank records and other financial records.

**SPECIAL CONDITIONS****1. AS A CONDITION OF SUPERVISION, THE COURT MAY ORDER A FINE OR RESTITUTION.**

- The court imposes a fine as part of your punishment. This means that you will have to make certain sacrifices financially in order to pay the fine.
- The fine is delinquent if a payment is more than 30 days late and is considered in default when there have been no payments for four months or the amount of arrearage exceeds four monthly payments.
- The court will be notified, if your payments are in default, and appropriate action will be taken.
- The court may order monthly installment payments. If the court has not ordered specific installment payments, the probation officer will determine the payment schedule.
- The monthly installment payments are determined by your ability to make payments. The probation officer will require that you provide copies of all expenses and your income, and any income that your spouse or significant other contributes to your necessary expenses. The probation officer will then determine a payment schedule based on your income and necessary expenses. The payment schedule will be determined by the difference between your necessary expenses and your income, allowing for emergency and unexpected expenses.
- Expenses must be reasonable for your income, size of family, and the geographical area that you live in. Recreation, vacation, travel, luxury items and items of comfort, may not be permitted so you can get your fine or restitution paid.
- Periodically, you will be required to submit a financial statement with documentation of all of your expenses. The probation officer will determine your income and your necessary expenses and then determine what your ability to pay will be for the next six months.
- The payment schedule is closely monitored and failure to make payments may result in a hearing before the court or Parole Commission.
- Restitution for actual damages caused by the offense of conviction may also be imposed as a condition of supervision. The procedure is the same for restitution as for a fine.

- Fine and restitution payments are to be made payable to the Clerk, U.S. District Court, on all cases sentenced after September 24, 1994.
2. **YOU SHALL PARTICIPATE IN A DRUG OR ALCOHOL TREATMENT PROGRAM AS DIRECTED BY THE PROBATION OFFICER AND YOU MAY BE REQUIRED TO BEAR ALL OR PART OF THE EXPENSE FOR TREATMENT.**
- If you have a history of drug or alcohol abuse, you will be referred to a treatment program.
  - The purpose of the drug/alcohol condition is to protect the community and assist you in achieving a drug-free existence.
  - You will be required to abstain from all illegal use of substances and alcohol or other intoxicants while in treatment.
  - You may be ordered to pay all or part of the treatment costs.
3. **YOU SHALL BE PLACED ON HOME DETENTION FOR A PERIOD OF \_\_\_\_\_ AND SHALL OBSERVE THE RULES OF THE PROGRAM.**
- In lieu of part of your imprisonment, you may be placed on home detention, which may include electronic monitoring. If so, you will receive another information sheet more fully describing this particular program. You may be required to pay for the costs of the program.
4. **YOU SHALL COMPLETE \_\_\_\_\_ HOURS OF COMMUNITY SERVICE AS DIRECTED BY THE PROBATION OFFICERS DURING THE PERIOD OF SUPERVISION.**
- Community service is defined as non-salaried service by you for a set period of time to a civic or non-profit organization, ordered by the court as a condition of probation or supervised release.
  - You may be ordered to pay a fee to an agency for placement in a community service agency. This fee will also provide you with accident insurance during the time you perform community service.

**5. YOU SHALL PARTICIPATE IN MENTAL HEALTH TREATMENT AS DIRECTED BY THE PROBATION OFFICER.**

- The court or the Parole Commission may impose this condition when you are unable to cope with stress and/or display symptoms of mental illness. The probation officer is available to assist you should you feel the need for counseling.
- You may be ordered to pay all or part of the treatment costs for mental health treatment.

**6. OTHER SPECIAL CONDITIONS THAT MAY BE IMPOSED:**

- **COMMUNITY CONFINEMENT:** This condition requires that you reside and participate in a residential reentry center program for a period not to exceed 120 days and that you abide by all of the rules of the residential reentry center. With the exception of employment, you will be able to leave the center only on a limited basis. This may be imposed to assist you in establishing a more stable lifestyle or to give you additional structure and support.
- **THIRD PARTY RISK:** The court may impose a condition that you disclose your conviction, prior record or any other particular characteristics to a specific person or organization. The probation officer will verify that the disclosure was made. (Please refer to Page 10 under Standard Conditions of Supervision.)



**APPENDIX**

**DIRECTIONS FOR COMPLETING THE MONTHLY SUPERVISION REPORT FORM**

This monthly form is to be completed at the end of each month and sent to the probation office no later than the 5<sup>th</sup> day of the following month. The form must be completed thoroughly and accurately. Do not hesitate to discuss this form with your probation officer if you have any questions about how to complete it. If something does not apply specifically to you, put N/A. **Do not leave any lines blank.**

**PART A**

1. **Print** your first, last and middle name legibly.
2. **Print** any other name that may have been used in Court.
3. **Print** your full street address and apartment number. **DO NOT PUT P.O. BOX OR MAIL DROP NUMBERS IN THIS SPACE.**
4. **Print** your city, state and zipcode clearly.
5. **Print** the name of your apartment/town home complex and or community subdivision. Advise as to whether you rent or own the property.
6. This is where you may list your P.O. Box number or any other mailing address.
7. **Print ALL** phone numbers including pagers, cellular phones, car phones, and message numbers, or answering services.
8. List **ALL NAMES** of persons living at your residence.
9. Check yes or no if you moved during the month.
10. **Print** the exact date of move and reason for moving. **THE PROBATION OFFICER MUST BE PERSONALLY NOTIFIED OF A MOVE WITHIN 72 HOURS – DO NOT COUNT THIS FORM AS NOTIFICATION.**

**PART B**

11. **Print** NAME, ADDRESS AND PHONE number of employer. If self-employed, list office address, phone number and name of company.
12. **Print** name of immediate supervisor and phone extension.
13. Check yes or no as to employer's knowledge of your criminal status.

14. **Print** the number of days missed from work and the specific reason for the absence.
15. **Print** your exact job title.
16. List the gross income which is your total income BEFORE deductions.
17. **Print** the exact days and hours you report to and leave from work. (Not 40 hours).
18. Check yes or no if you had a job change or were terminated during the month. **THE PROBATION OFFICER MUST BE PERSONALLY ADVISED OF THIS CHANGE WITHIN 72 HOURS.**
19. **Print** exact date of termination and reason why you were terminated from the employment.

### PART C

20. List all vehicles **OWNED OR DRIVEN** by you. **Print** the year, make, model, color of vehicle, license plate number and name of the owner. This must be completed in detail each month. This also includes company vehicles you may drive.

### PART D

21. This is the amount of income you bring home AFTER deductions.
22. List any additional monies or benefits you received during the month such as food stamps, welfare, inheritance, loans, trust funds, spouses income, etc.
23. Add up your net income plus the “other income” and put the amount here.
24. The total of all expenses incurred goes here.
25. List ALL debts which are PAST DUE and the amount you owe.
26. Check whether you have a checking account and list the name of the bank and your account numbers. Indicate whether this is an individual or joint account and list who is on the signature card. List your exact balance at the end of the month. The probation officer may request copies of bank statements to verify this information.
27. Do the same as #26 in regard to your savings accounts.

28. List all purchase of goods or services you paid \$500 or more for during this month. Print the amount of purchase, date, description of item and method used for payment. If you used a credit card, list which card was used.

**PART E**

29. If you were questioned by law enforcement officers, check yes. If yes, provide the exact date of questioning, who questioned you, name of agency and officer, and the reason for the questioning. **YOU MUST NOTIFY YOUR PROBATION OFFICER WITHIN 72 HOURS OF THIS CONTACT.** Attach copies of citations, bond papers, complaints or other documents for verification. Otherwise, check no.
30. If you were arrested or named as a defendant in any other case, check yes. If yes, give the details including the date of charges and disposition or status of case. Otherwise, check no.
31. If you resolved any pending charges this month, check yes. If yes, indicate the exact date of hearing, the court you attended and final disposition of the case. Attach a copy of the citation, receipt, charges and disposition. Otherwise, check no.
32. Was anyone in your household arrested or questioned by law enforcement during this month? If yes, state who (full name) was arrested and the reason for the arrest. Advise as to the disposition or status of the case. Otherwise, check no.
33. If you had contact with anyone who has a criminal record, check yes and list their full name. Otherwise, check no.
34. If you possessed or had ANY access to a firearm, check yes and explain why. Otherwise, check no.
35. If you possessed or used any illegal drugs, check yes and explain when, why and type of drug. Otherwise, check no.
36. If you traveled outside the State of Colorado, check yes and explain where you went and why. If possible, attach copy of flight information. Otherwise, check no.
37. If you have a special assessment fee, restitution, or a fine to pay, check yes and list the amount of your monthly payment. Attach a copy of the money order used for payment. Otherwise, check no.
38. If you have community service to complete, check yes. List the number of hours you completed this month, the number of hours you missed, and the balance of hours remaining. Otherwise, check no.

39. Indicate whether you have a drug, alcohol or mental health aftercare condition. If so, indicate whether you missed any sessions during the month. Indicate whether you failed to respond to any phone recorder instructions and why. Otherwise, check no.
40. Read the warning regarding truthful statements on this report.
41. Sign your full name and date you completed the report.

**U.S. PROBATION OFFICE**  
**MONTHLY SUPERVISION REPORT FOR THE MONTH \_\_\_\_\_, 20 \_\_\_\_.**

Name:		Court Name (if different):																		
<b>PART A: RESIDENCE (If new address, attach copy of lease/purchase agreement.)</b>																				
Street Address, Apt. Number: Own or Rent?		Home Phone: Cellular Phone: Pager:																		
City, State, Zip Code:		Persons Living With You:																		
Secondary Residence: Own or Rent?		Did you move during the month? <input type="checkbox"/> Yes <input type="checkbox"/> No																		
Mailing Address (if different): E-Mail Address:		If yes, date moved: _____ Reason for Moving:																		
<b>PART B: EMPLOYMENT (If unemployed, list source of support under Part D.)</b>																				
Name, Address, Phone No. of Employer: _____ _____ _____		Name of Immediate Supervisor: Is your employer aware of your criminal status? <input type="checkbox"/> Yes <input type="checkbox"/> No																		
		How many days of work did you miss? _____ Why?																		
		Position Held:	Gross Wages:	Normal Work Hours:																
Did you change jobs? <input type="checkbox"/> Yes <input type="checkbox"/> No Were you terminated? <input type="checkbox"/> Yes <input type="checkbox"/> No		If changed jobs or terminated, state when and why:																		
<b>PART C: VEHICLES (List all vehicles owned or driven by you.)</b>																				
1. Year/Make/Model/Color:		Mileage:	Plate Number:	Owner:																
2. Year/Make/Model/Color:		Mileage:	Plate Number:	Owner:																
<b>PART D: MONTHLY FINANCIAL STATEMENT</b>																				
Net Earnings from Employment: _____ (Attach Proof of Earnings)  Other Cash Inflows: _____  TOTAL MONTHLY CASH INFLOWS: _____  TOTAL MONTHLY CASH OUTFLOWS: _____  AMOUNT OF CASH ON HAND: _____		Do you rent or have access to: a post office box? <input type="checkbox"/> Yes <input type="checkbox"/> No a safe deposit box? <input type="checkbox"/> Yes <input type="checkbox"/> No a storage space? <input type="checkbox"/> Yes <input type="checkbox"/> No Name and Address of Location: _____ Box No. or Space _____ _____ _____ _____																		
Do you have any past due debts? <input type="checkbox"/> Yes <input type="checkbox"/> No To whom are they due (List all creditors): _____ Amount past due: _____																				
Do you have checking account(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No Bank Name: _____ Account _____ Balance: _____ Do you have savings account(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No Bank Name: _____ Account _____ Balance: _____ Attach a complete listing of all other financial account information, if you multiple accounts.		Does your spouse, significant other, or dependant have a checking or savings account that you enjoy the benefits of or make occasional contributions toward? <input type="checkbox"/> Yes <input type="checkbox"/> No  Bank Name: _____  Account No.: _____ Balance: _____																		
List all expenditures over \$500 (including e.g., goods, services, or gambling losses) <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: center; width: 15%;"><u>Date</u></th><th style="text-align: center; width: 15%;"><u>Amount</u></th><th style="text-align: center; width: 25%;"><u>Method of Payment</u></th><th style="text-align: center; width: 45%;"><u>Description of Item</u></th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr></tbody></table>					<u>Date</u>	<u>Amount</u>	<u>Method of Payment</u>	<u>Description of Item</u>	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
<u>Date</u>	<u>Amount</u>	<u>Method of Payment</u>	<u>Description of Item</u>																	
_____	_____	_____	_____																	
_____	_____	_____	_____																	
_____	_____	_____	_____																	

**PART E: COMPLIANCE WITH CONDITIONS OF SUPERVISION DURING THE PAST MONTH**

Were you questioned by any law enforcement officers?

☐ Yes ☐ No

If yes, date: \_\_\_\_\_

Agency: \_\_\_\_\_

Reason: \_\_\_\_\_

Were you arrested or named as a defendant in any criminal case?

☐ Yes ☐ No

If yes, when and where? \_\_\_\_\_

Charges: \_\_\_\_\_

Disposition: \_\_\_\_\_

(Attach copy of citation, receipt, charges, disposition, etc.)

Were any pending charges disposed of during the month?

☐ Yes ☐ No

If yes, date: \_\_\_\_\_

Court: \_\_\_\_\_

Disposition: \_\_\_\_\_

Was anyone in your household arrested or questioned by law enforcement?

☐ Yes ☐ No

If yes, whom? \_\_\_\_\_

Reason: \_\_\_\_\_

Disposition: \_\_\_\_\_

Did you have any contact with anyone having a criminal record?

☐ Yes ☐ No

If yes, whom? \_\_\_\_\_

Did you possess or have access to a firearm?

☐ Yes ☐ No

If yes, why? \_\_\_\_\_

Did you possess or use any illegal drugs?

☐ Yes ☐ No

If yes, type of drug: \_\_\_\_\_

Did you travel outside the district without permission?

☐ Yes ☐ No

If yes, when and where? \_\_\_\_\_

Do you have an outstanding special assessment, restitution, or fine balance?

☐ Yes ☐ No

If yes, amount you paid this month:

Special Assessment: \_\_\_\_\_

Restitution: \_\_\_\_\_

Fine: \_\_\_\_\_

**NOTE: ALL PAYMENTS TO BE MADE BY MONEY ORDER (POSTAL OR BANK) OR CASHIER'S CHECK ONLY.**

Do you have community service work to perform?

☐ Yes ☐ No

Number of hours completed this month: \_\_\_\_\_

Number of hours missed: \_\_\_\_\_

Balance of hours remaining: \_\_\_\_\_

Do you have a drug, alcohol, or mental health aftercare condition?

☐ Yes ☐ No

If yes, did you miss any sessions during this month?

☐ Yes ☐ No

Did you fail to respond to phone recorder instructions?

☐ Yes ☐ No

If yes, why? \_\_\_\_\_

**WARNING: ANY FALSE STATEMENTS MAY RESULT IN REVOCATION OF PROBATION, SUPERVISED RELEASE, OR PAROLE, IN ADDITION TO 5 YEARS IMPRISONMENT, A \$250,000 FINE, OR BOTH.**

(18 U.S.C. § 1001)

I CERTIFY THAT ALL INFORMATION FURNISHED IS COMPLETE AND CORRECT.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

REMARKS:

RECEIVED:

\_\_\_\_\_ Mail \_\_\_\_\_ OC

\_\_\_\_\_ HC \_\_\_\_\_ CC

**RETURN BETWEEN THE 1<sup>ST</sup> AND 5<sup>TH</sup> OF THE MONTH TO:**

**UNITED STATES PROBATION OFFICE  
1929 STOUT STREET, SUITE C-120  
DENVER, COLORADO 80294**

\_\_\_\_\_  
U.S. Probation Officer

\_\_\_\_\_  
Date

# REQUEST FOR PERMISSION TO TRAVEL OUTSIDE DISTRICT OF COLORADO

TO BE SUBMITTED 3 WEEKS PRIOR TO TRAVEL (EMERGENCIES EXCEPTED)

NAME \_\_\_\_\_ OFFICER'S NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

## REQUEST FOR PERMISSION TO TRAVEL TO:

\_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State

REQUEST TO LEAVE ON \_\_\_\_\_ RETURN ON \_\_\_\_\_

## I WILL TRAVEL BY:

Circle method of travel: Automobile Air Railway Bus

### If by Automobile:

Make \_\_\_\_\_ Model \_\_\_\_\_ Lic. No. \_\_\_\_\_

Color \_\_\_\_\_ Registered to: \_\_\_\_\_

### If by Air, Railway, or Bus:

Carrier \_\_\_\_\_ Flight or Other No. \_\_\_\_\_

PURPOSE OF TRAVEL: \_\_\_\_\_  
\_\_\_\_\_

## Name, Address and Telephone Number of Person with Whom You Will Be Staying.

(If hotel/motel, provide that information)

\_\_\_\_\_ Name (person with whom I will stay) \_\_\_\_\_ Relationship \_\_\_\_\_ Prior Criminal Record? \_\_\_\_\_

\_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone-Day \_\_\_\_\_ Telephone-Eve \_\_\_\_\_

Other persons I plan to contact: \_\_\_\_\_ Prior criminal record? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ESTIMATED TOTAL COST? (Travel/lodging/food) \_\_\_\_\_

SOURCE OF FUNDS TO PAY ABOVE COSTS? \_\_\_\_\_

## ANSWER THE FOLLOWING:

1. Are you current in fine/restitution payments? ☐ Yes ☐ No ☐ N/A
2. Do you have any pending charges? ☐ Yes ☐ No If yes, explain \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_  
Approved USPO \_\_\_\_\_ Date \_\_\_\_\_



## GENERAL INFORMATION

**OFFICE HOURS:** 8:00 A.M. TO 5:00 P.M.  
Monday through Friday

Voice mail is available after hours for emergency messages.

## COLORADO STATE LAWS:

Colorado State Law, C.R.S. 18-3-412.5, requires registration of convicted sex offenders. Consult with your probation officer regarding the requirements of the current law and follow his/her instructions regarding registration. There are criminal penalties for failing to register.

\*\*\*

State law requires motorists to have a valid driver's license and insurance to operate a motor vehicle. Documentation of compliance, including vehicle registration, insurance and driver's license should be made available to the probation officer if requested.

\*\*\*

Under Colorado State Law, C.R.S. 18-12-108, convicted felons are prohibited from possessing any firearms or other weapons, to include muzzle loaders (black powder) and archery equipment. **Persons convicted of felony offenses cannot hunt in Colorado.** This is applicable to all resident and nonresident hunters with felony convictions.

## ACKNOWLEDGMENT

I have read or had read to me the orientation manual as well as the conditions of supervision. I have received a copy of both.

Acknowledgment: \_\_\_\_\_

Signature	Print Name	Date

Witness: \_\_\_\_\_

Signature	Title	Date
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**FILE COPY OF ACKNOWLEDGMENT**

I have read or had read to me the orientation manual as well as the conditions of supervision. I have received a copy of both.

Acknowledgment: \_\_\_\_\_

Signature	Print Name	Date

Witness: \_\_\_\_\_

Signature	Title	Date
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