

**SPECIAL ASSESSMENT/FINE/RESTITUTION PAYMENT SLIP  
(ON OR AFTER APRIL 24, 1996)**

DEFENDANT'S NAME:
PROBATION OFFICER'S NAME:
CRIMINAL DOCKET NUMBER:
AMOUNT OF PAYMENT:
DATE OF PAYMENT:

**TYPE OF PAYMENT:**     S/A             Fine             Restitution

**TO THE DEFENDANT:**    MAKE CHECK OR MONEY ORDER PAYABLE TO: CLERK,  
UNITED STATES DISTRICT COURT, ALFRED A. ARRAJ UNITED STATES  
COURTHOUSE, 901 19TH STREET, ROOM A-105, DENVER, COLORADO 80294-3589

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