



Court Enforcement Division
 Gilbert Municipal Court
 55 E. Civic Center Dr.
 Gilbert, Az. 85296
 (480) 635-7800

COMMUNITY SERVICE REPORTING FORM

The purpose of this form is to verify community service work performed **for a non-profit agency as allowed on the Community Service Instructions**. By submitting this to the Gilbert Municipal Court, you certify that the information contained is true and accurate. All information submitted will be carefully reviewed and verified with the non-profit agency. Each sheet is to include hours performed for one non-profit agency only. If you require additional forms for hours completed at another agency, you can find them online at <http://www.gilbertaz.gov/court> Please PRINT and fill out all information completely and submit the document to the Court either in person, fax, the red drop box outside the court entrance or by U.S. Mail.

Defendant Name: _____

DOB: _____

Case number(s): _____

Non-Profit Agency: _____

Address: _____

Phone: _____

Person Supervising: _____

Email Address: _____

DATE	TIMES (To – From)	DUTIES	TOTAL HOURS

I, _____, certify that I am authorized to represent the nonprofit agency _____ and further certify that the hours/duties above are accurate and correct.

*Please understand the Court’s Enforcement Division will be following up to verify these hours.

Signature

Phone

Date