

MORONI JUSTICE COURT
80 SOUTH 200 WEST, PO BOX 870
MORONI, UT 84646
Phone 435-426-8359 Fax 435-436-8178

FAIRVIEW JUSTICE COURT
165 NORTH STATE, PO BOX 97
FAIRVIEW, UT 84629
Phone 435-427-3858 Fax 435-427-3275

MANTI JUSTICE COURT
50 SOUTH MAIN
MANTI, UT 84642
Phone 435-835-4631 Fax 435-835-2632

WORK ASSIGNMENT FORM

Defendant: _____

Case #: _____

Date: _____

Name of Non-Profit: _____

of hours worked this month: _____

Supervisor: _____

Supervisor' Signature: _____

Hours should be turned in to the court monthly.

This person has been ordered by the Court to complete community service hours. You should have filled out a form previously authorizing him/her to complete these community service hours at your facility. (If you have not completed the REQUEST FOR COMMUNITY SERVICE HOURS please ask the Defendant to provide that to you.) It is his/her responsibility to complete this assignment in accordance with the work schedule that you provided for him/her. Each month this form should be filled out stating the dates and hours worked. Please sign and returned to the above named Court. It is his/her responsibility to satisfactorily performing the tasks assigned and report to work as you require. If he/she does not do this please send this form back to the Court, stating the problem, so that appropriate actions can be taken.

Your cooperation is appreciated.
Judge Ivo R. Peterson

Date	Hrs Completed	Date	Hrs Completed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

This person's work was:

- Satisfactory Unsatisfactory Did not report and work as assigned

Comments (use back if necessary):