Case No._____

STATE OF TEXAS
VS.
_____
_____
_____

IN THE JUSTICE COURT
PRECINCT _____
LIBERTY COUNTY, TEXAS

COMMUNITY SERVICE TIME SHEET

TOTAL HOURS: _____ HOURS PER MONTH: _____

- All participants must fill out name of organization and all appropriate information concerning their community service participation. Only Non-profit organizations or approved social programs can be community service providers.
- Please print (information that cannot be read – student will not receive community service hours).
- All participants are responsible for obtaining their own community service placements, signature of contact person for community service, and contact person's validation of community service hours earned. Only the contact person can fill out community service hours and must initial hours worked.
- All participants are responsible for turning in community service hours on or before their due date.

Date:	C/S Hours Worked	Initials		Date:	C/S Hours Worked	Initials

Total Hours Worked : _____

NAME OF ORGANIZATION: _____

I certify that the above information is true and correct to the best of my knowledge:

_____ _____
Signature Date

_____ _____
Address Phone Number

_____ _____
City/State/Zip Email