**CARVER COUNTY COURT SERVICES WORK SERVICE TIMECARD AND VERIFICATION**

# Client Name: Hours Ordered Due:

***I understand that my Community Work Service site must be pre-approved by Carver County Court Services.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date** | **Time In** | **Time Out** | **Total Hours** | **Balance** | **Initials** |
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Notice to CWS worksite:

The above named has been ordered to complete community work service hours. Please contact the probation officer listed below with any questions.

Comments by worksite supervisor regarding work completed:

Worksite Supervisor (print):

Worksite Supervisor (signature):

Worksite Phone:

Probation Officer Name/Phone:

Probation Officer Email:

Carver County Court Services

Main: 952-361-1460

(05/06/2024)