

CHARLOTTE COUNTY DIVERSION PROGRAM  
350 East Marion Avenue, Punta Gorda, FL, 33950 (941) 637-2116

MONTHLY REPORT

Case No: \_\_\_\_\_

Diversion Officer: \_\_\_\_\_

Your Name: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Is address different from last report?  Yes  No

Employment: Full Time  Part Time

WHAT WAS YOUR TOTAL INCOME LAST MONTH? .....\$ \_\_\_\_\_

If not working give reason and source of income \_\_\_\_\_

Did you go into debt for any reason?.....  Yes  No  N/A

If yes, explain: \_\_\_\_\_

Have you obtained a valid driver's license?.....  Yes  No  N/A

Have you provided proof to your officer? \_\_\_\_\_ If not when?: \_\_\_\_\_

Have you consumed alcohol since last report?.....  Yes  No  N/A

If yes, how much and why: \_\_\_\_\_

Are you attending Counseling?.....  Yes  No  N/A

If yes, what kind, where and how many sessions attended? \_\_\_\_\_

Did you complete the Shoplifter's Course? .....  Yes  No  N/A

Have you paid the Community Service Fee?.....  Yes  No  N/A

How many Community Service / County Work Hours Completed? \_\_\_\_\_ Where? \_\_\_\_\_

If hours completed, have you turned in time sheet to your officer?.....  Yes  No  N/A

How much have you paid this month towards your financial obligations? \$ \_\_\_\_\_ Balance \$ \_\_\_\_\_

Do you have Restitution to pay?.....  Yes  No Balance \$ \_\_\_\_\_

If you have any questions or problems to discuss with your officer, explain: \_\_\_\_\_

Have you had any contact with law enforcement? If so, what and when: \_\_\_\_\_

*Make all checks or money orders payable to: Clerk of the Circuit Court*

Your Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_